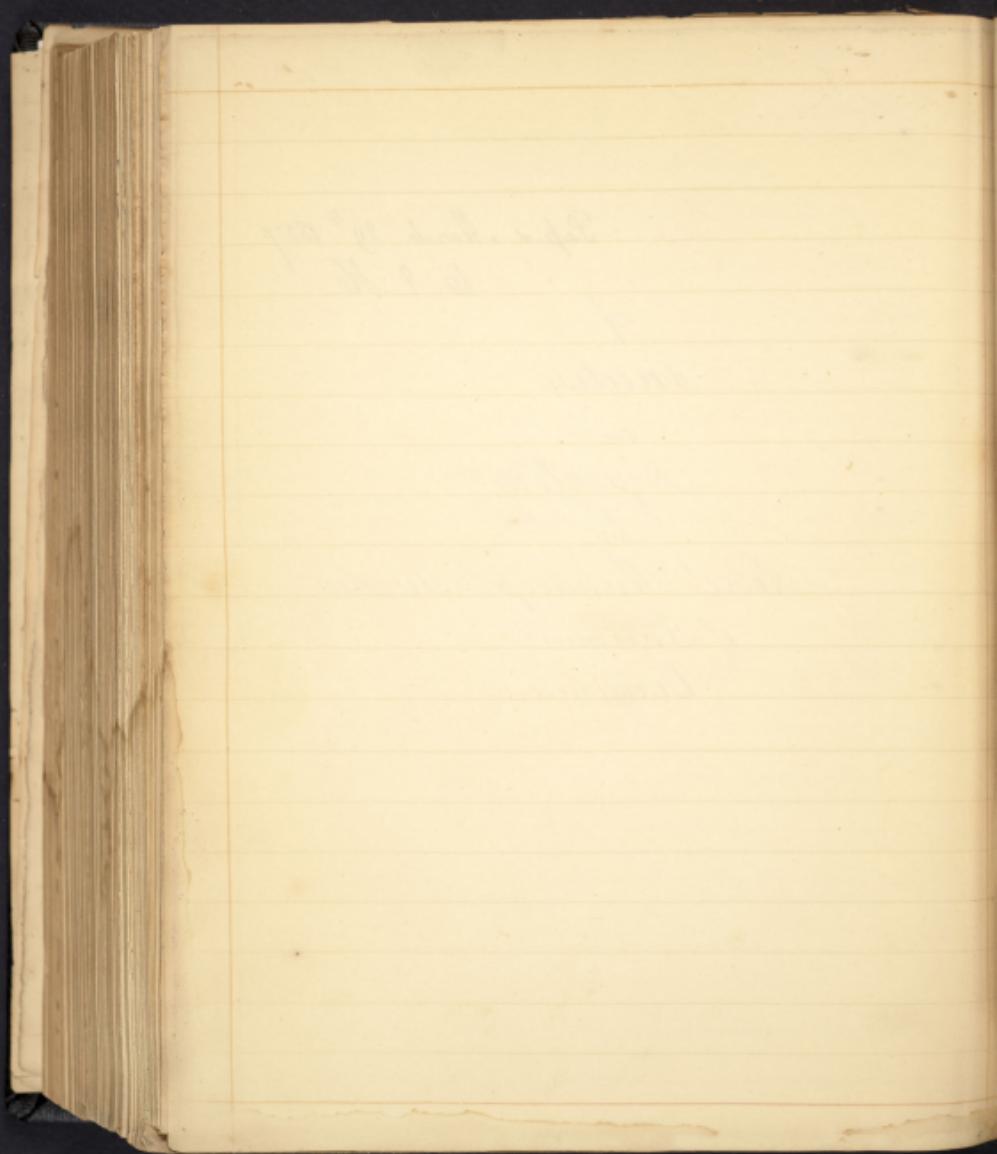


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Rapid. March 29<sup>th</sup>. 1827

W. & H.

A  
Treatise  
on  
Dysentery,  
by  
Robert Randolph Turner  
of Faquier,  
Virginia.

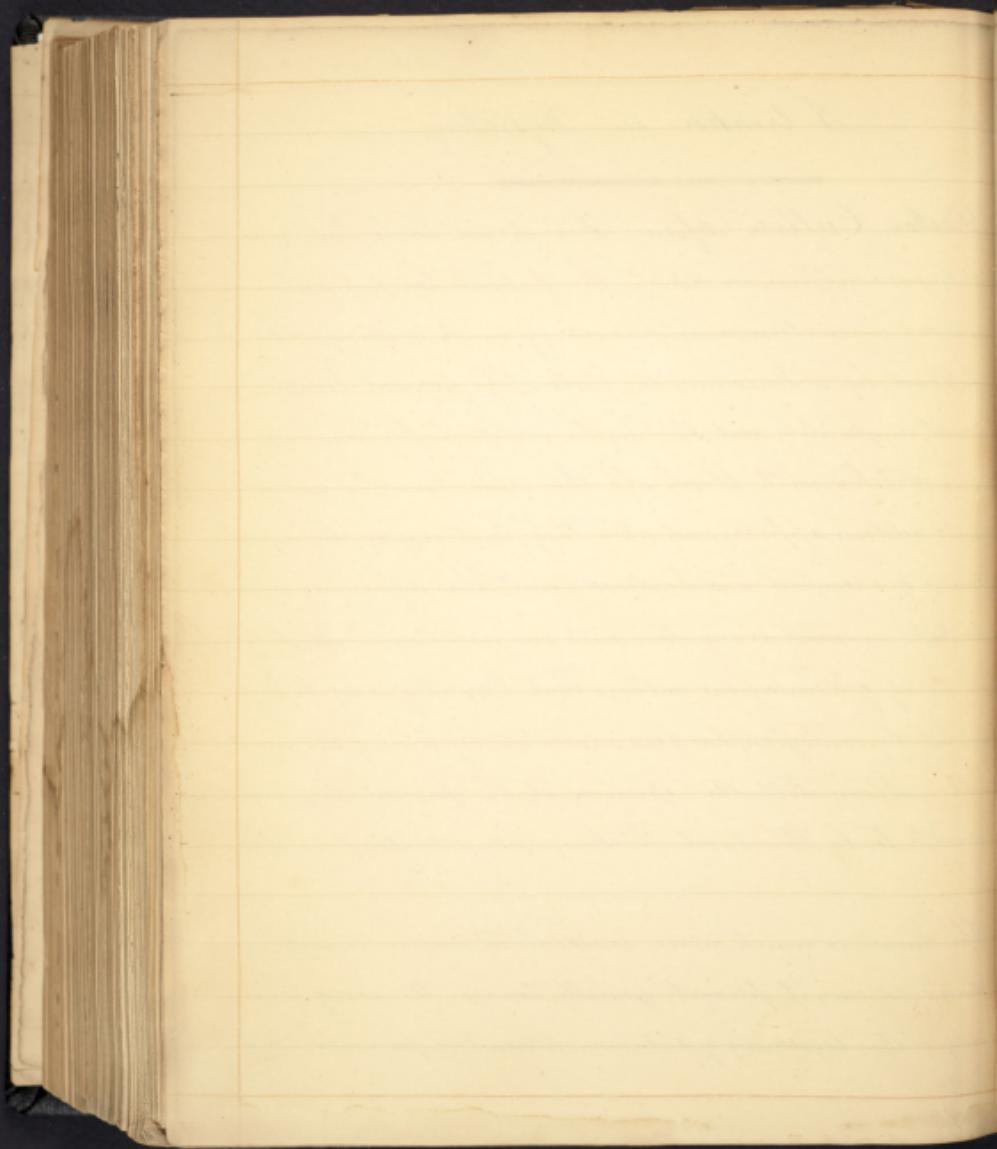


## A treatise on Dysentery.

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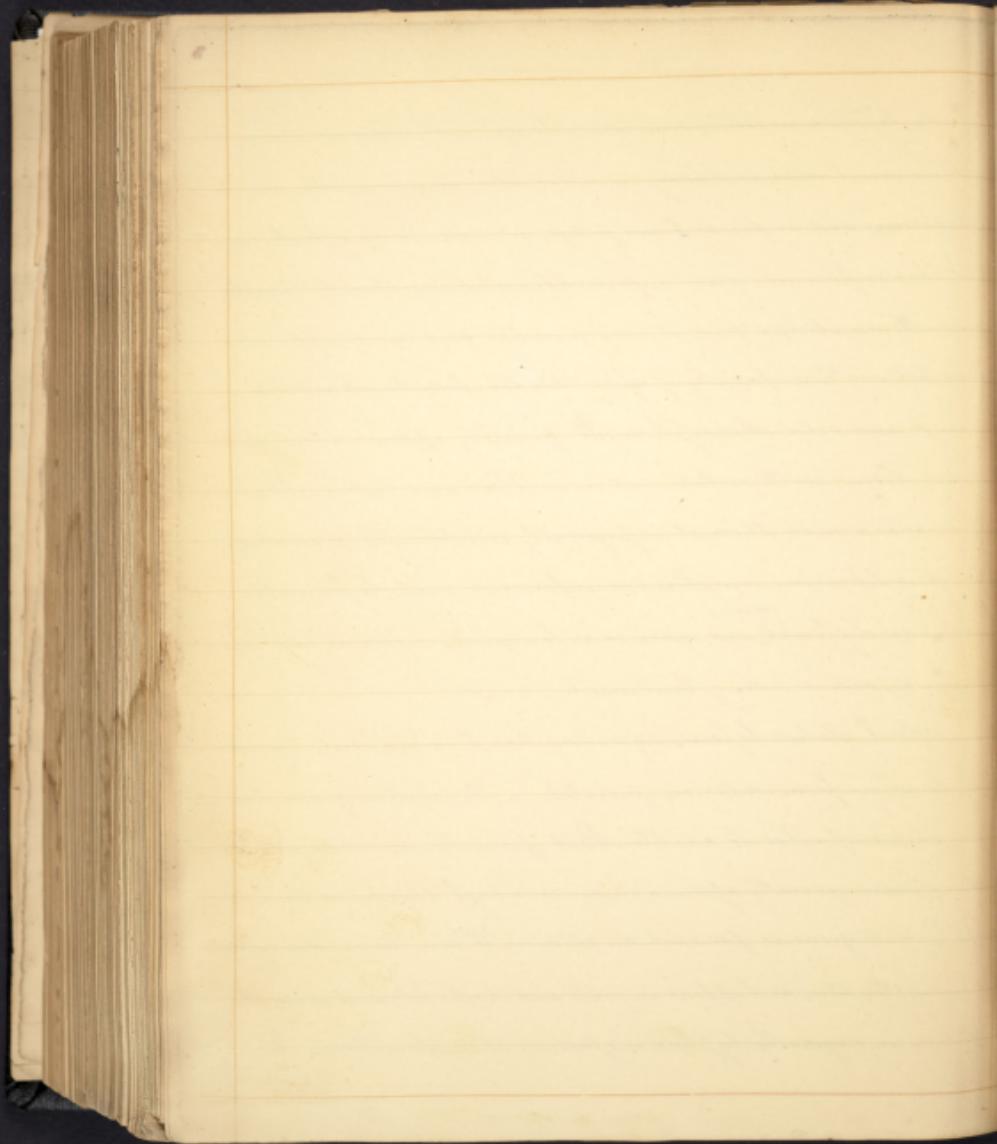
Doctor Cullen define this disease to be "One of a contagious nature, in which the patient has frequent mucous evacuations, accompanied by much griping, and followed by a tenesmus; the stools altho frequent being small in quantity, and the matter voided, chiefly mucous, often streaked with blood. At the same time, the natural bowels seldom appear; and when they do, it is generally in substance of a corrupt and hardened form." This definition is perhaps as correct as any other, with one exception; I allude to the being of a contagious nature. That Dysentery may be propagated by contagion, has been advocated by some of our most able writers; still the opinion, at the present day, is not shared by the most thinking and judicious practitioner.

The disease is much more incident to warm climates than cold ones; it prevails, generally, towards the end of summer, or the beginning of autumn, continuing from about six



up to two months, sometimes longer still. This season of the year, it is undoubtedly in our country, very frequently an epidemic, and as far as I can judge, is more to be attributed to the influence of an impure atmosphere, than to any other cause. We sometimes find it very prevalent and severe, after close and hot weather; especially if after this, the body be exposed to a damp and cold atmosphere. It generally appears about the same time, with autumnal remittent and intermittent fevers; and with them it is frequently complicated or combined; it is likewise sometimes complicated with typhus. It varies in different <sup>seasons</sup> and years, so as to require different and sometimes opposite modes of treatment.

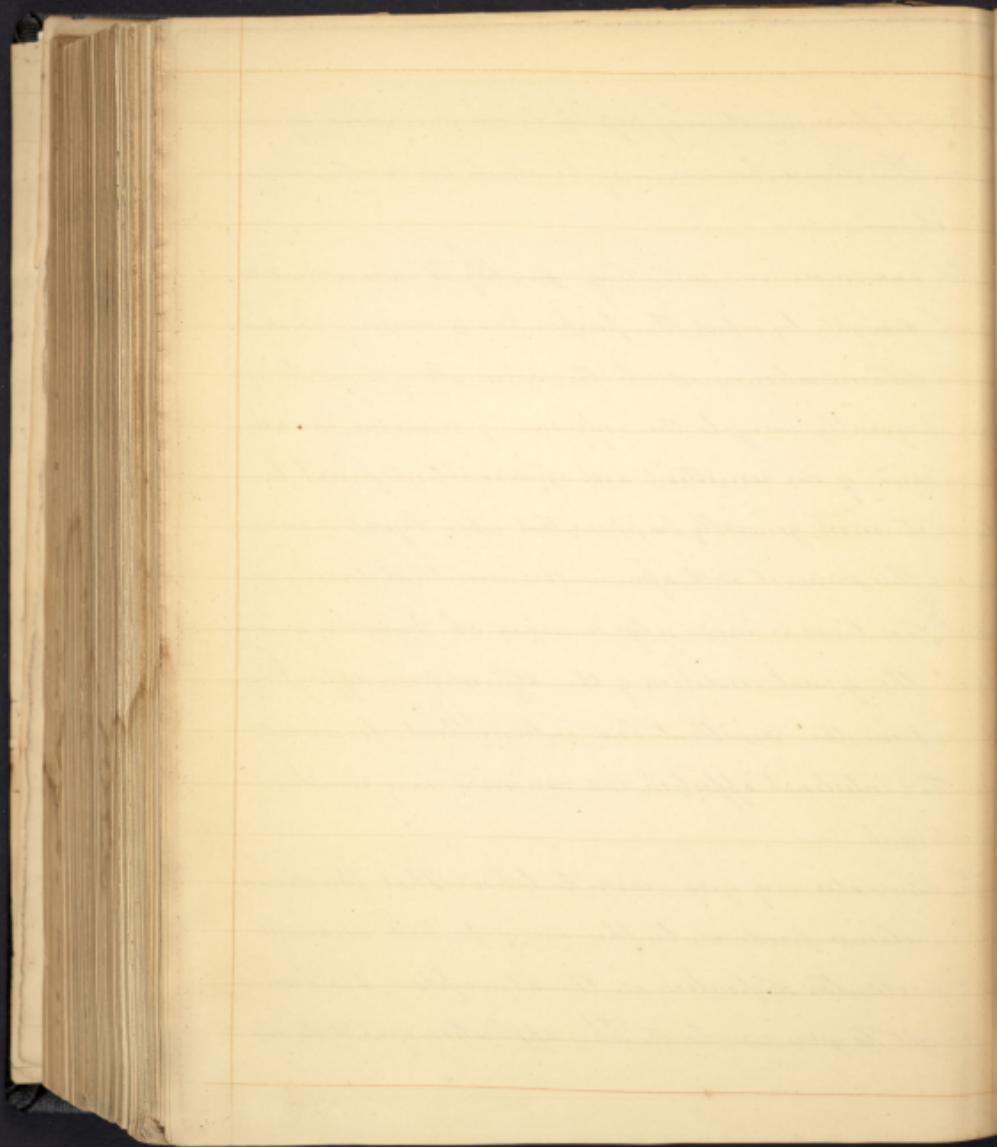
As I stated before, Typhus has been supposed by many to arise from contagion, generated in the system of one person and imparted to another. But from the character which the disease generally assumes, in our country, I think we have no sufficient grounds for such an opinion. Where there are many crowded together, as happen in jails and hospitals, and when the disease is originally typhus, or a fever of that character in its



page, I presume it may possibly be communicated by contagion. The disease however may be attributed to other causes, surely —

Cold and moisture succeeding quickly to intense heat or great drought, by which the perspiration is suddenly checked, and a determination made to the alimentary canal. It is very frequently owing to the influence of miasma, the ordinary cause of our remittent and intermittent fevers. I believe, it most generally happens, that when Dysentery arises from this source, it will assume the remittent form, and that the liver is more deeply concerned. & Dysentery arising from the general condition of the atmosphere, differs I believe, from the remittent and intermittent fevers, only in the intestinal affection, and requires a very similar treatment.

We have also very good reason to believe, that the disease is sometimes produced, by the use of putrid aliment. A particular disposition in the atmosphere, has been thought to give rise to it. The application of cold to the

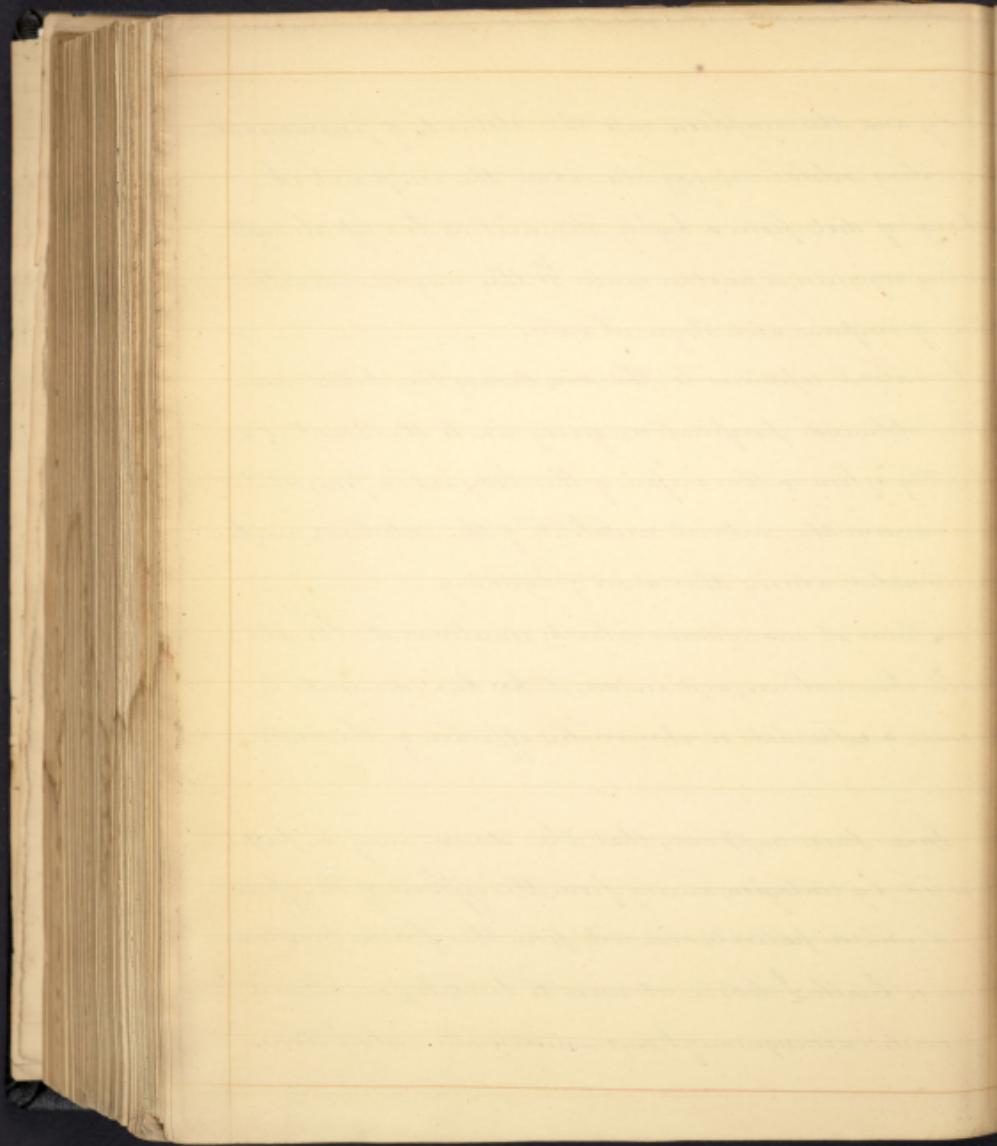


body, and the reception into the stomach, of poisonous and irritating substances, may also induce the complaint. A change of diet, from a highly stimulating to a less strengthening regimen, is another cause. To this may be added the use of impure and stagnant waters.

A constant exposure to the sun, during the hottest weather, obstructs perspiration, giving rise to the want of a healthy action on the surface of the body, and, in fine, whatever increases the natural irritability of the intestines, may be numbered among the causes of Dysentery.

Sometimes it accompanies catarrh; sometimes it alternates with rheumatism; and indeed, it has been considered by some, a catarrhal or rheumatic affection of the intestines.

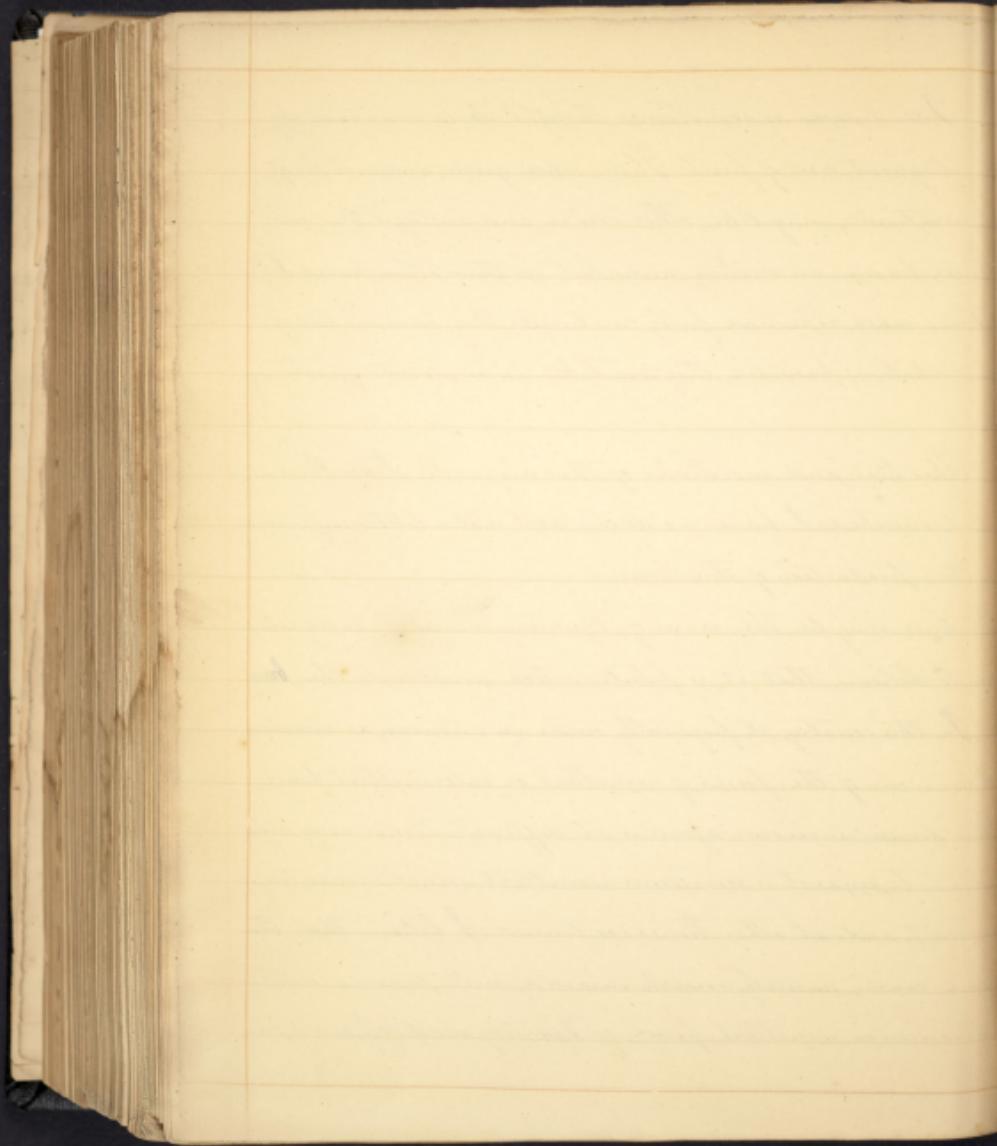
Some have supposed, that the disease may be propagated by contagion, arising from the effluvia of the feces of dysenteric patients, and not from the febrile perspiration or breath. I believe it need not be contagious, when it prevails in consequence of noxious—miasmatic habits.



The disease is sometimes thought to be occasioned, by  
a frequent use of fruit. These, when green and not fully  
matured, may like other crude and indigestible sub-  
stances, prove an exciting cause; but on the other hand, I  
have, when ripe and fully matured, they have no bad ef-  
fect whatever, provided they are taken in moderate quanti-  
ties.

The heat and moisture of the air, as Sir John Rein-  
a remarked, I have no doubt, exert not a little influence  
on the production of this disease.

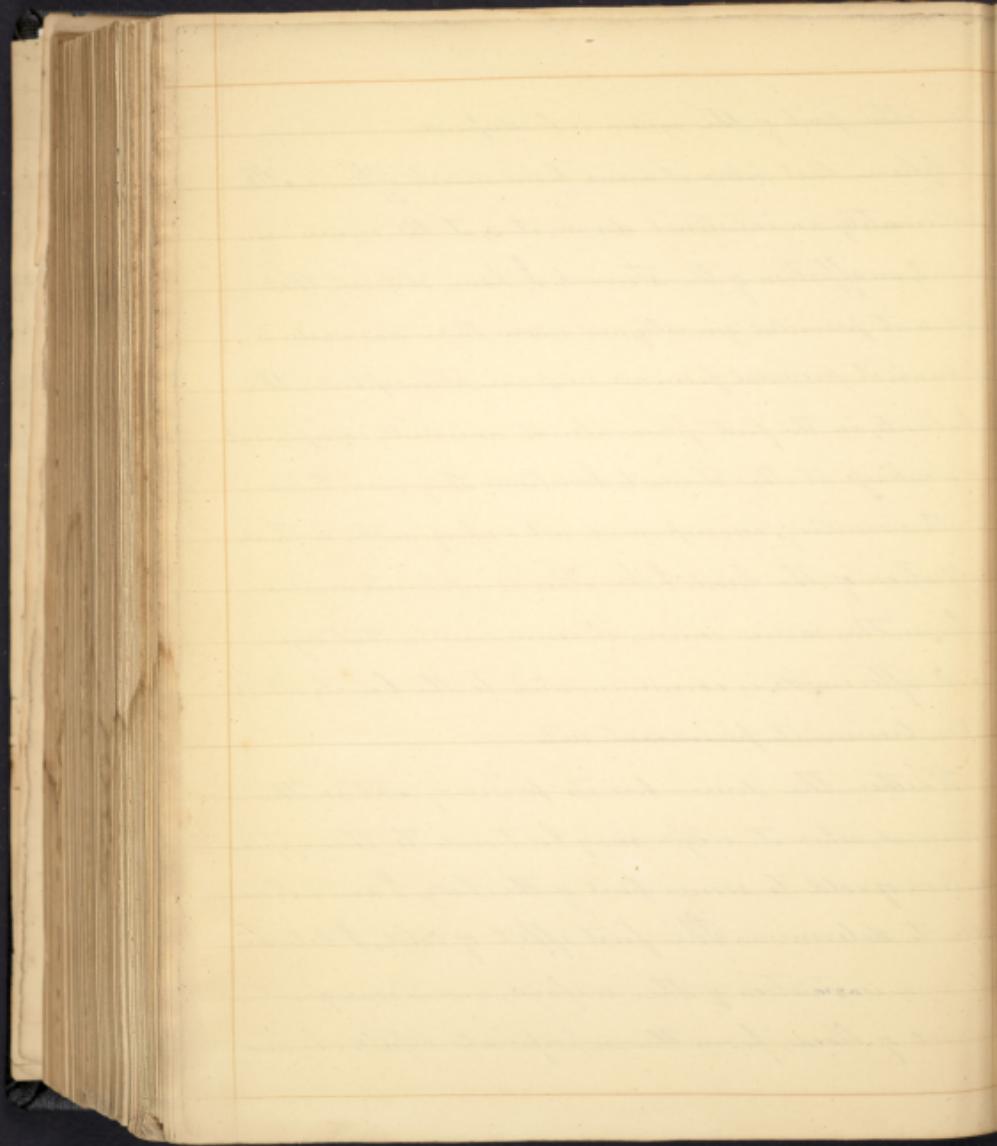
Whatever may be the cause of Dysentery, we have every rea-  
son to believe, that it is fibile action, directed to the bowels.  
In this country, it frequently occurs in autumn, as vicarious  
some one of the forms of remittent or intermittent fever.  
The disease, moreover, assumes at different times, very differ-  
ent types; as it is sometimes remittent, sometimes inter-  
mittent, and at other times continued. I believe that the  
same cause, namely, marsh miasma, will produce either  
a common remittent fever, or Dysentery, accordingly, as one, or



the other part of the system is pre-disposed.

I believe that when it arises from marsh effluvia, although ultimately an intestinal disease, it is, at the commencement, an affection of the stomach. I have observed, that when it prevailed generally, and where there was reason to believe, it proceeded from an impure atmosphere, the patients, in the first place, almost universally complained of a sickness at the stomach. Sometimes they were taken with vomiting, accompanied not infrequently, with an affection of the head. Like other complaints, arising from the same source, it commences in that organ, and afterwards, is communicated to the bowels, which then become its permanent seat.

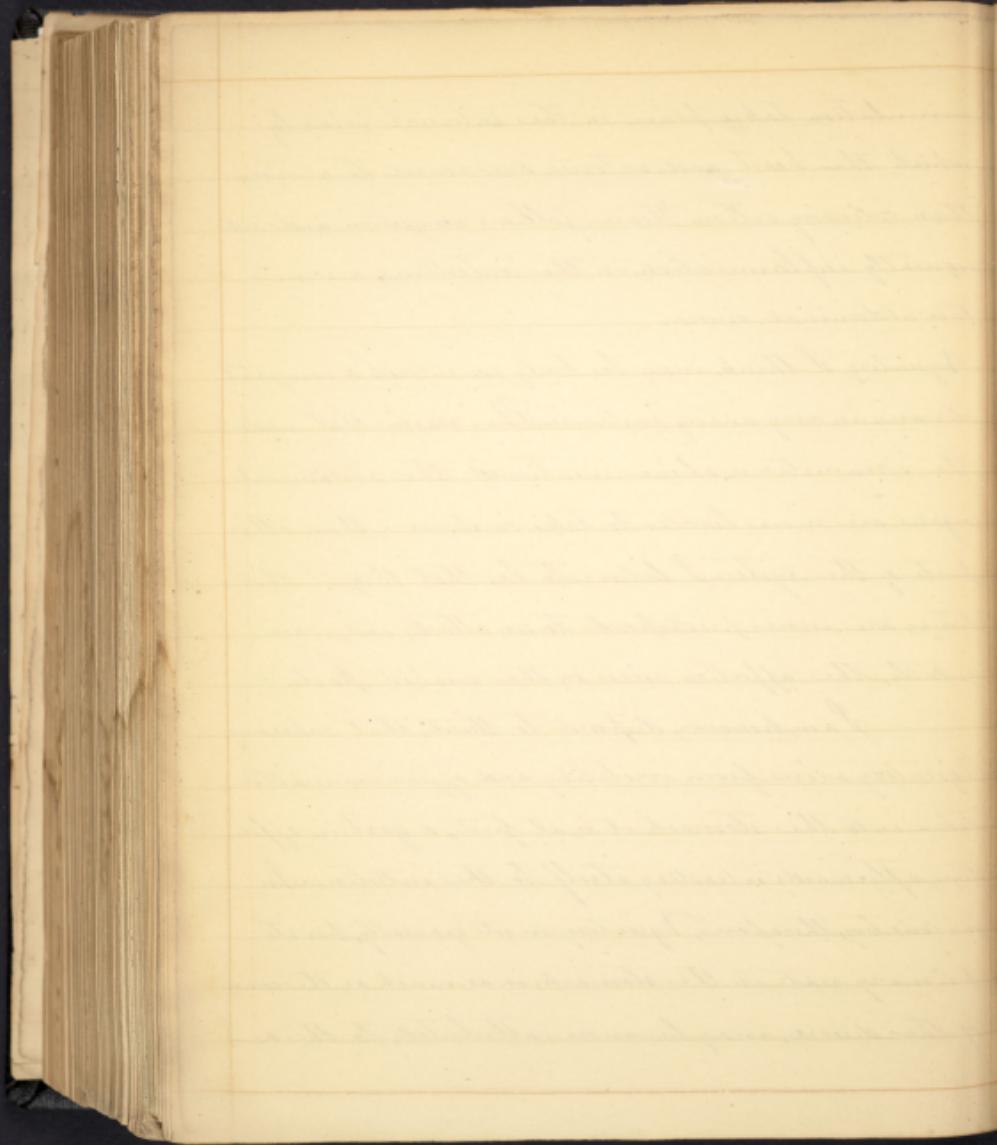
Whether the disease has its primary seat in the stomach, when its origin may be traced to the application of cold to some part of the body, I am not able to determine. The first effect of cold, I believe to be, a constriction of the surface, and a consequent exhalation of blood, from the superficial vessels. This ac-



inflammation takes place in the internal viscera by which the heart and arteries are caused to a more than ordinary action. Hence follows congestion and subsequently inflammation, in the intestines, a common other abdominal viscera.

Dysentery, I think, may be truly considered a congested disease, in very many instances. The reason that under the circumstances, above mentioned, the abdominal organs are more liable to take on disease, than other parts of the system, I believe to be, that they, at that time, are more predisposed to an attack; and, consequently, the affection rises on the weakest parts.

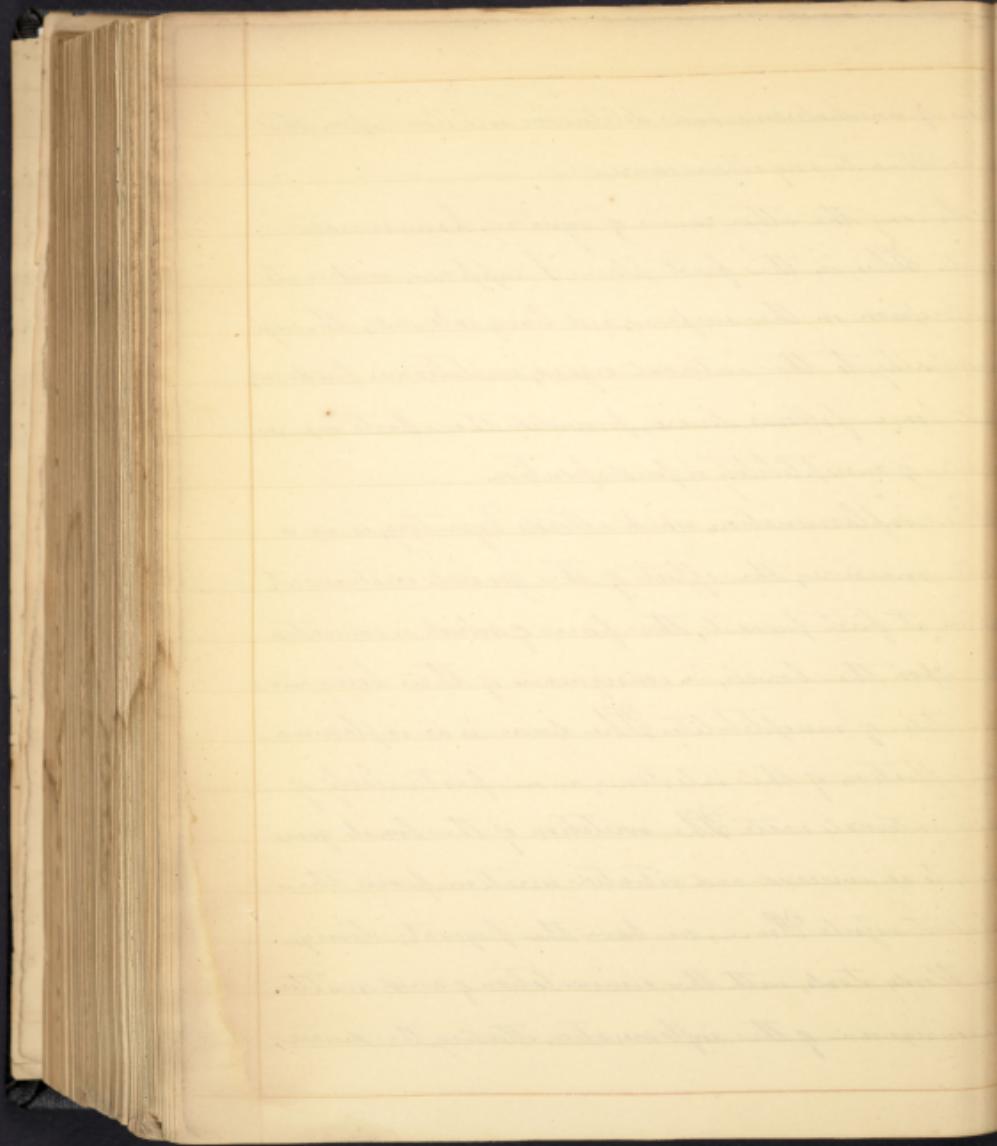
I am, however, disposed to think, that whenever dysentery arises from irritating and offensive matter taken into the stomach, it is, at first, a gastric affection, afterwards extending itself to the intestines. In our country, therefore, dysentery most generally, has its primary seat in the stomach, inasmuch as, the cause of the disease, may be more attributed, to the ac-



in of unwholesome and deleterious matter upon that  
so, than to any other cause.

Among the other causes of Typhety, I enumerate  
st. This, in the first place, I suppose, makes its  
operation on the surface, and being extended, through  
sympathy, to the internal organs, irritation is produced,  
& hence follows disease, provided those parts are in  
state of susceptibility or predisposition.

The inflammation, which attends Typhety, is in a  
certain measure, the effect of the general excitement,  
but, at first prevail, the force of which is concentra-  
tive upon the bowels, in consequence of their being more  
in state of susceptibility. The disease is an inflamma-  
tive affection of the intestines, more particularly of  
their internal coat. The irritation of the bowels gives  
rise to an increased and vivified secretion from the  
latent vessels. Hence, we have the frequent, strong,  
& bloody stools, with the accumulation of acrid matter  
in consequence of the inflammation, attending, the disease,

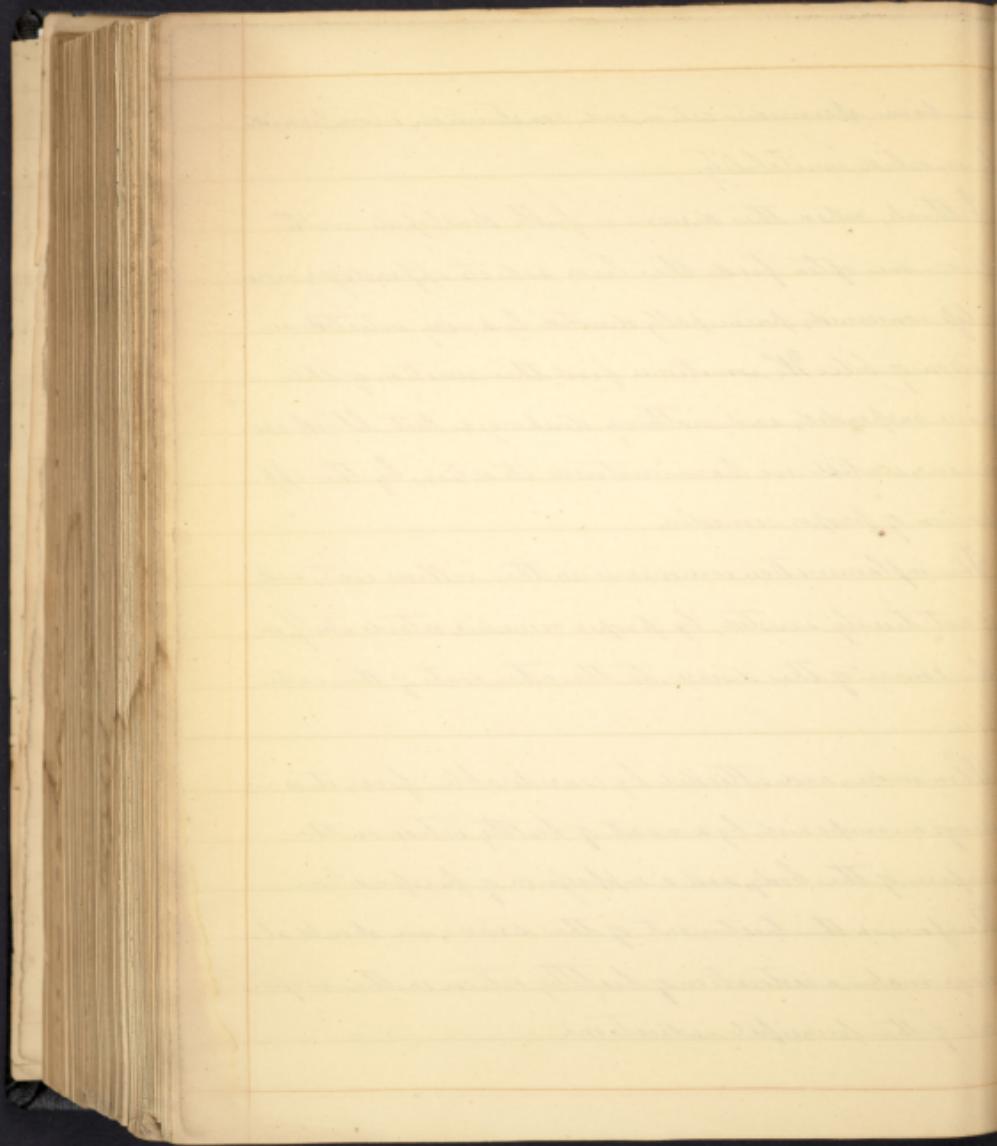


a hæmorrhoidic action and constriction, accompanied  
with morbid irritability.

I think, when the disease is fully developed with  
heat, we often find the liver and its appendages, more  
or less concerned; principally denoted by a very actuated ac-  
tion of bile. We sometimes find the secretion of this  
fluid suspended, and nothing discharged but blood and  
mucus, until we have restored its action, by the applica-  
tion of proper remedies.

The inflammation commences in the villous coat, and  
not timely arrested, by proper remedies, extends itself, in  
the course of the disease, to the other coats of the intes-  
tines.

When severe, and attended by considerable fever, it is  
always accompanied, by a want of healthy action on the  
surface of the body, and a suspension of perspiration.  
Therefore, in the treatment of the disease, we should al-  
ways make a restoration of healthy action, on the surface,  
one of the principal indications.

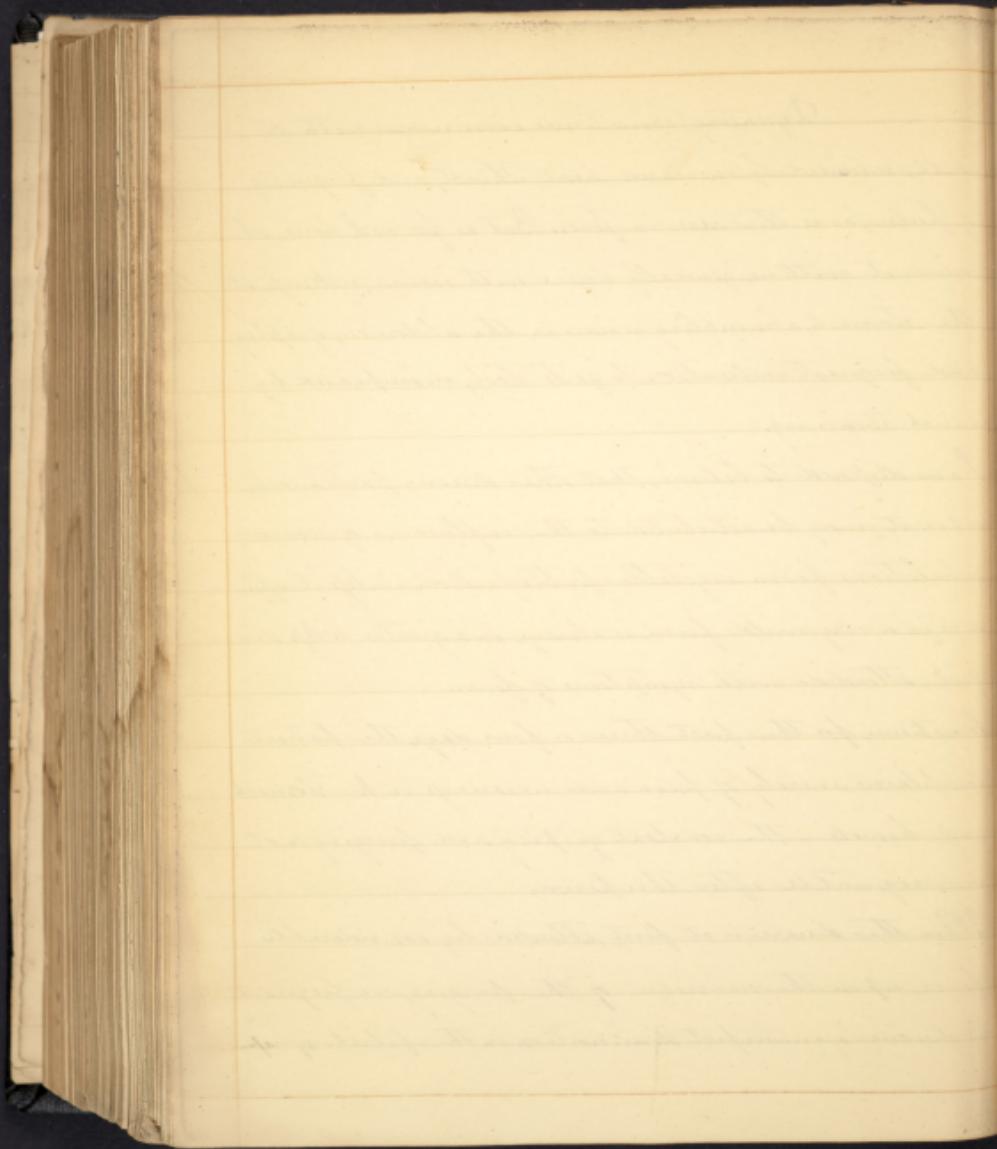


Dysentery sometimes commences with a chill, succeeded by increased heat, thirst, and frequency of pulse, as is the case in fever. But as far as I have observed, it neither, generally begins with some sickness at the stomach, a rumbling noise in the abdomen, griping, and frequent inclination to go to stool, accompanied by much straining.

I am disposed to believe, that the disease, particularly when it may be attributed to the influence of noxious inhalations from vegetable putrefaction, unless it appears in a very mild form, is always, in a greater or less degree, attended with symptoms of fever.

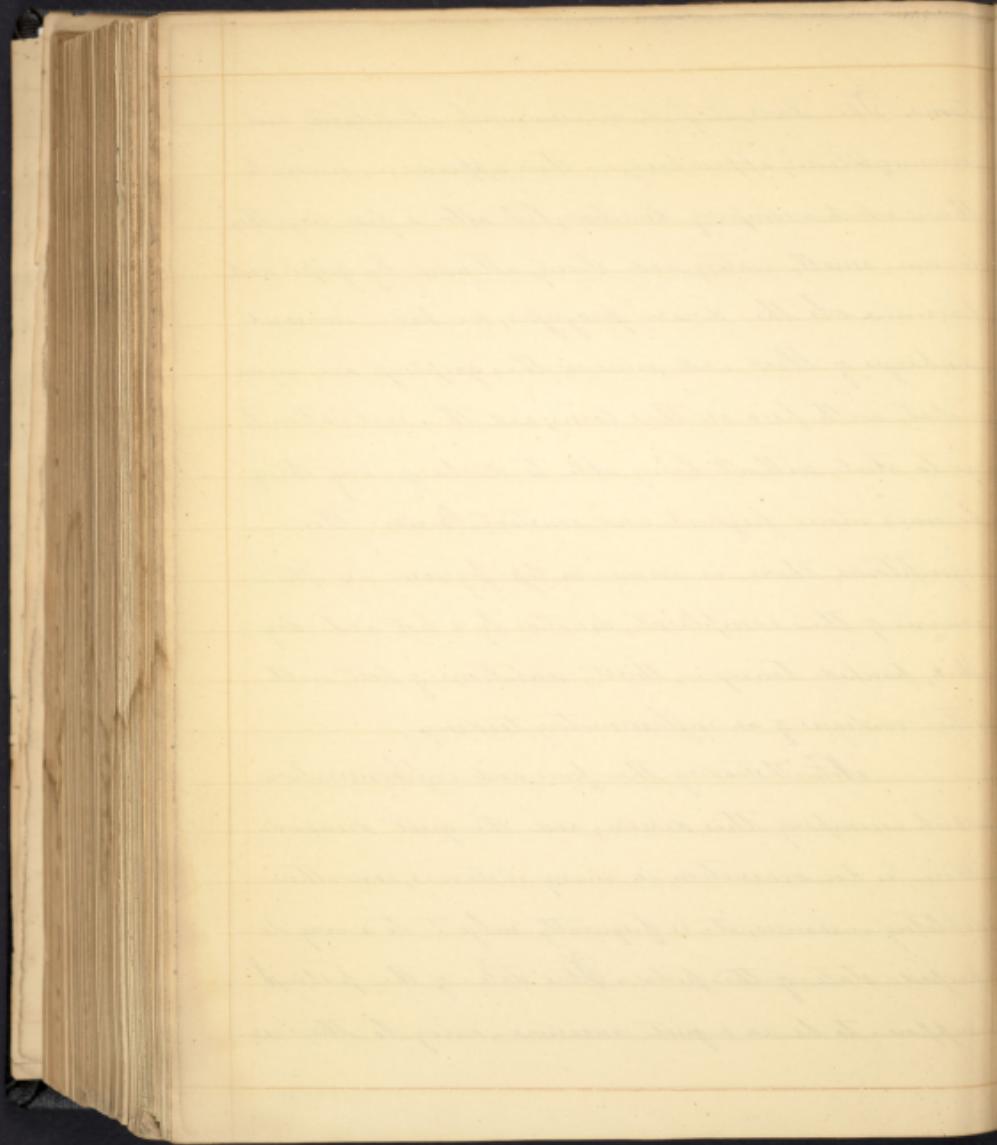
Sometimes, for the first three or four days, the patient complains merely of pain and uneasiness in his stomach and bowels—the constant griping and purging not commencing, until after this period.

When the disease is at first, attended by considerable fever, upon the occurrence of the purging, we frequently discover a manifest diminution in the febrile symp-



tear. The stools, at first, are commonly abundant and mucous, approaching, in their appearance, more to those, which accompany diarrhoea; but after a few days, they become small, watery, and slimy, attended by gripes and tenesmus. As the diarrhoea progresses, we have increased discharge of blood and mucus; the gripings are more violent, with pain in the loins; and the inclination to go to stool, without being able to discharge any thing, becomes more frequent and constant. Beside these symptoms, there is more or less pyrexia in the course of the complaint, denoted by a hot and dry skin, parched tongue, thirst, sensations of heat, with other evidences of an inflammatory tendency.

Notwithstanding the fever and inflammation, which accompany this disease, and the great demand there is for evacuation, in many instances, and other aperient measures, it is frequently subject to a very depressed state of the pulse. This state of the pulse I suppose to be in a great measure, owing to the re-

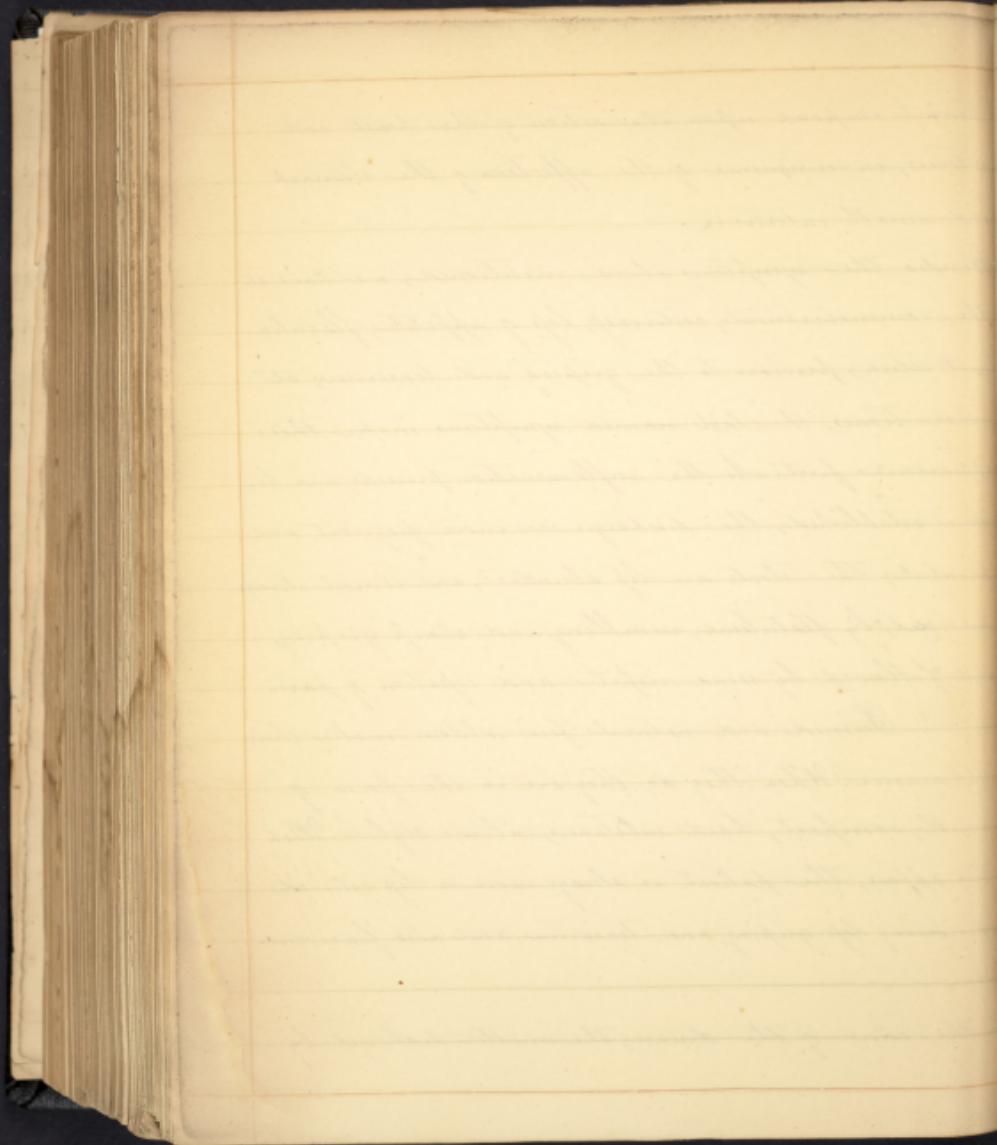


traint imposed upon the action of the heart and  
stomach, in consequence of the affection of the stomach  
and small intestines.

Besides the symptoms above mentioned, we have in  
the commencement, costiveness, loss of appetite, flatulen-  
tia, &c. previous to the griping and tenesmus; at  
other times, the last named symptoms make their  
appearance first. As the inflammation proceeds, and be-  
comes established, the discharges are more frequent and  
hurful; the stools are less abundant, and almost always  
preceded by flatulence, rumbling and sharp griping,  
and followed by some respite and ceipation of pain.

Formed and natural feces seldom make their  
appearance. When they do, they are in the form of  
small, compact, hard substances, called scybala. When  
they appear, the patient is always more or less relieved  
from the griping, and tenesmus, and also from mo-  
tions.

In the course of the disease, the matter discharged by

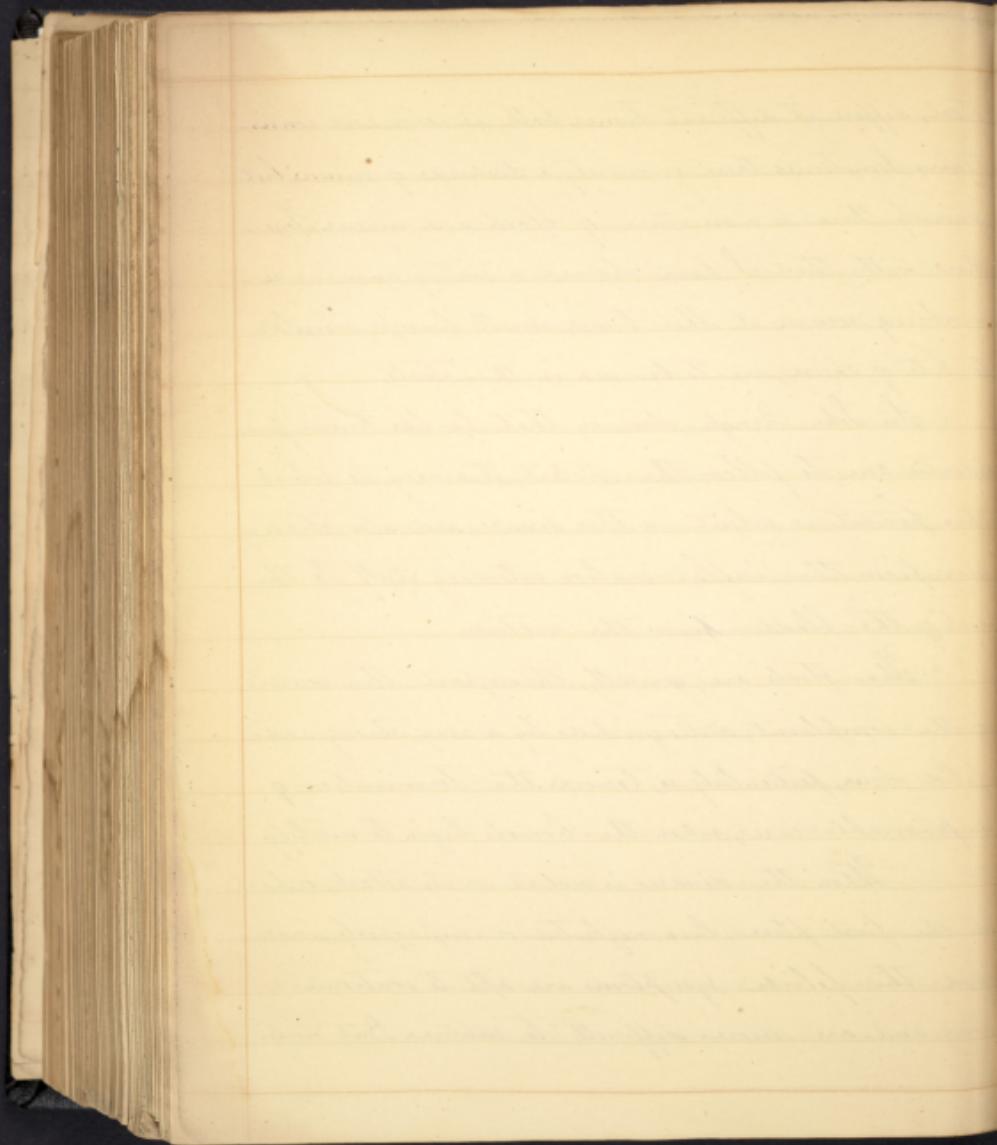


stools, differs at different times, both in color and consistency. Sometimes there is merely a discharge of mucus, but usually there is a mixture of blood and mucus. Together with these, I have observed a watery humor resembling serum; at other times, small lumps, similar to bits of cheese, are to be seen in the stools.

Sir John Pringle observes, that he has known proctitis ani to follow the violent, straining, to which the patient is subject in this disease; and also straining up from the inflammation extending itself to the neck of the bladder from the rectum.

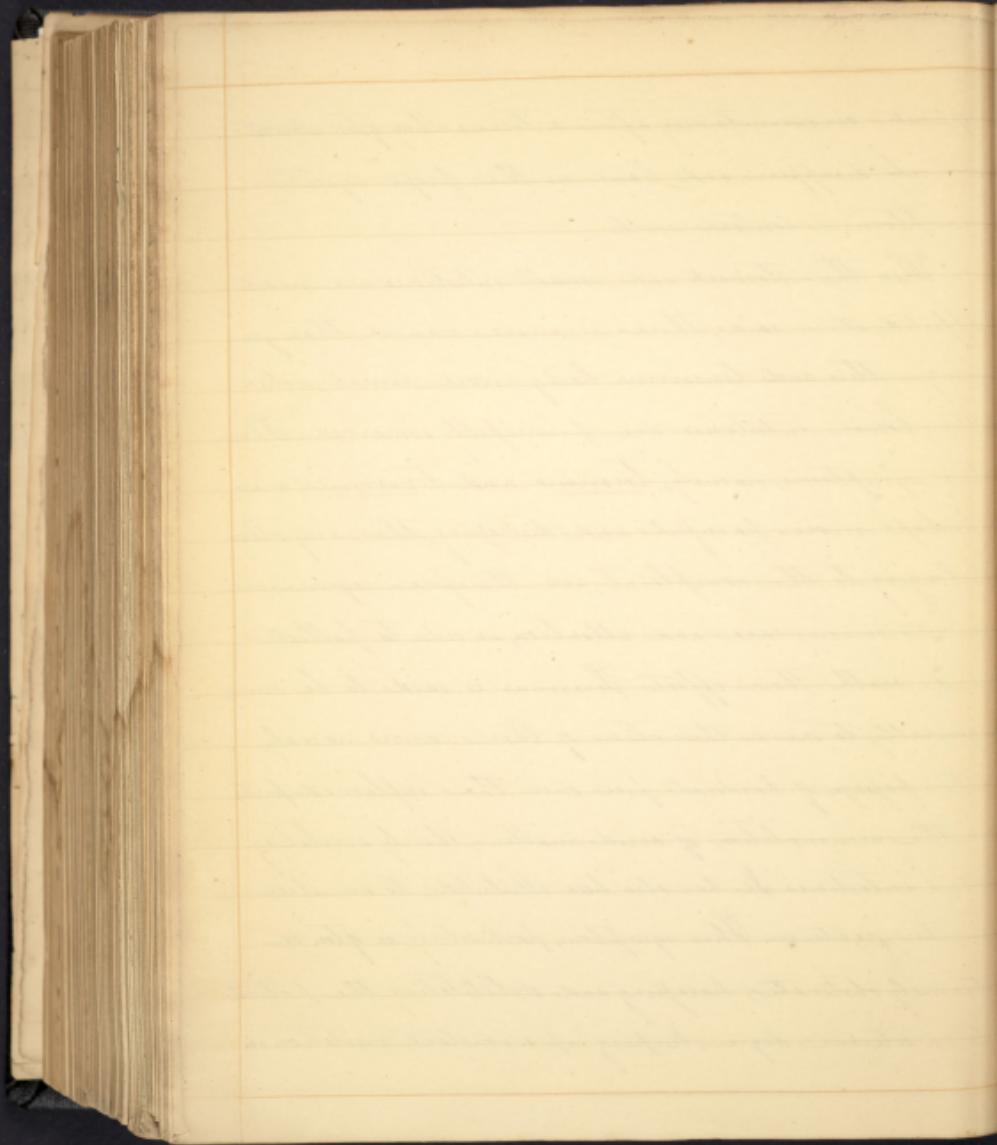
The stools are, generally, throughout the course of the complaint, distinguished by a very strong and fetid odour, particularly so, towards the termination of an unfavorable case, when the bowels begin to mortify.

When the disease is violent in its attack, or has in the first place, been neglected or improperly managed, the febrile symptoms are apt to continue long, and are more difficult to subdue. But under



opposite circumstances, after a time, they get almost entirely disappear, and leave us the proper dysenteric symptoms to contend with.

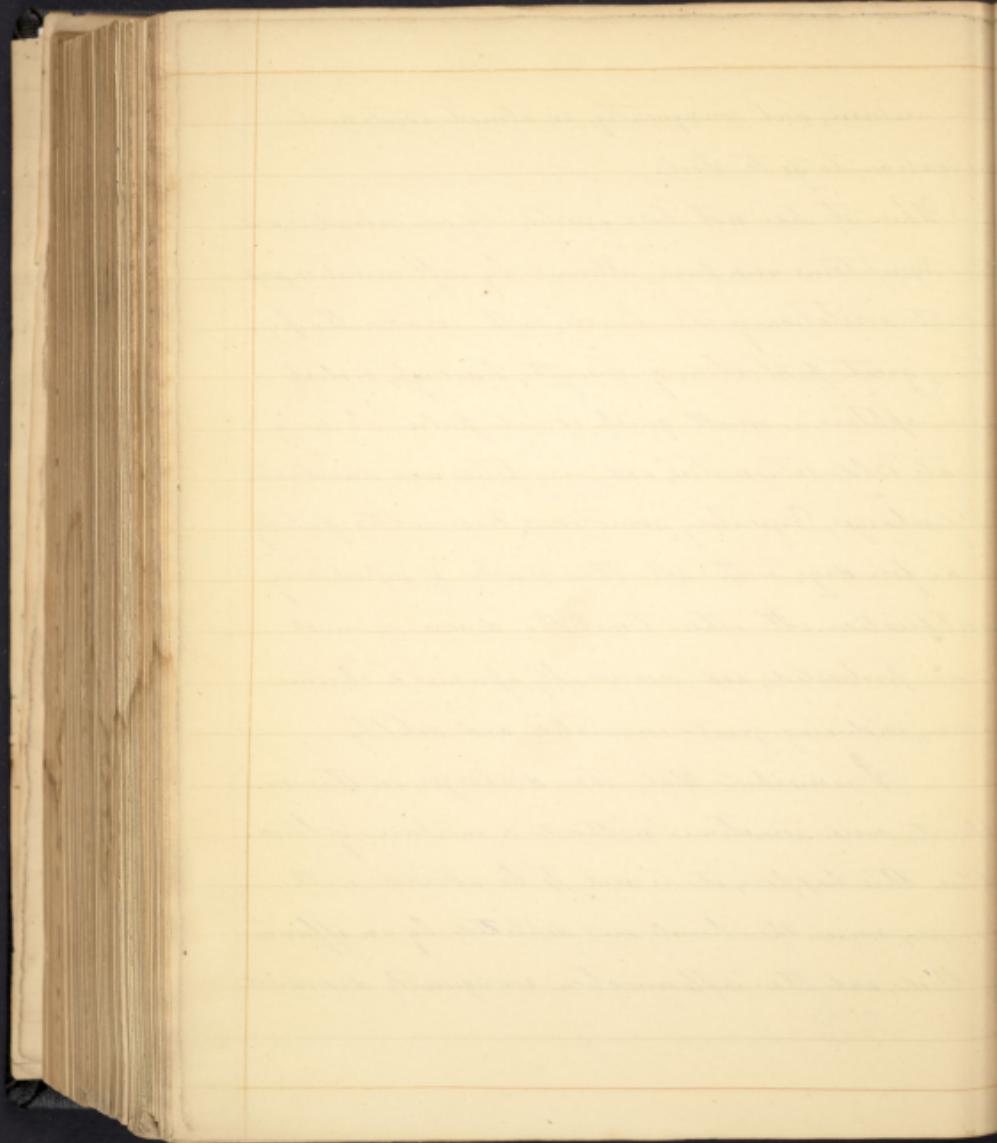
When the stomach and small intestines are most affected, it is said, there is more nausea than griping - this and tenesmus being more usual, when the lower intestines are principally concerned. These two symptoms, namely, trismus and tenesmus, are perhaps more painful and distressing, than any other belonging to the complaint, and therefore require our most serious care and attention, in order to palliate and sooth their effects. Tenesmus is said to be owing generally, to one or the other of these causes, namely, the passage of hardened feces over the inflamed parts, or the accumulation of acrid matter, thusly irritating the intestines. It has also been attributed, to an ulcer in the rectum. This symptom, particularly, is often extremely obstinate, harassing and debilitating the patient to an extreme degree, keeping up a constant irritation in



the rectum, and consequently, an almost continual disposition to go to stool.

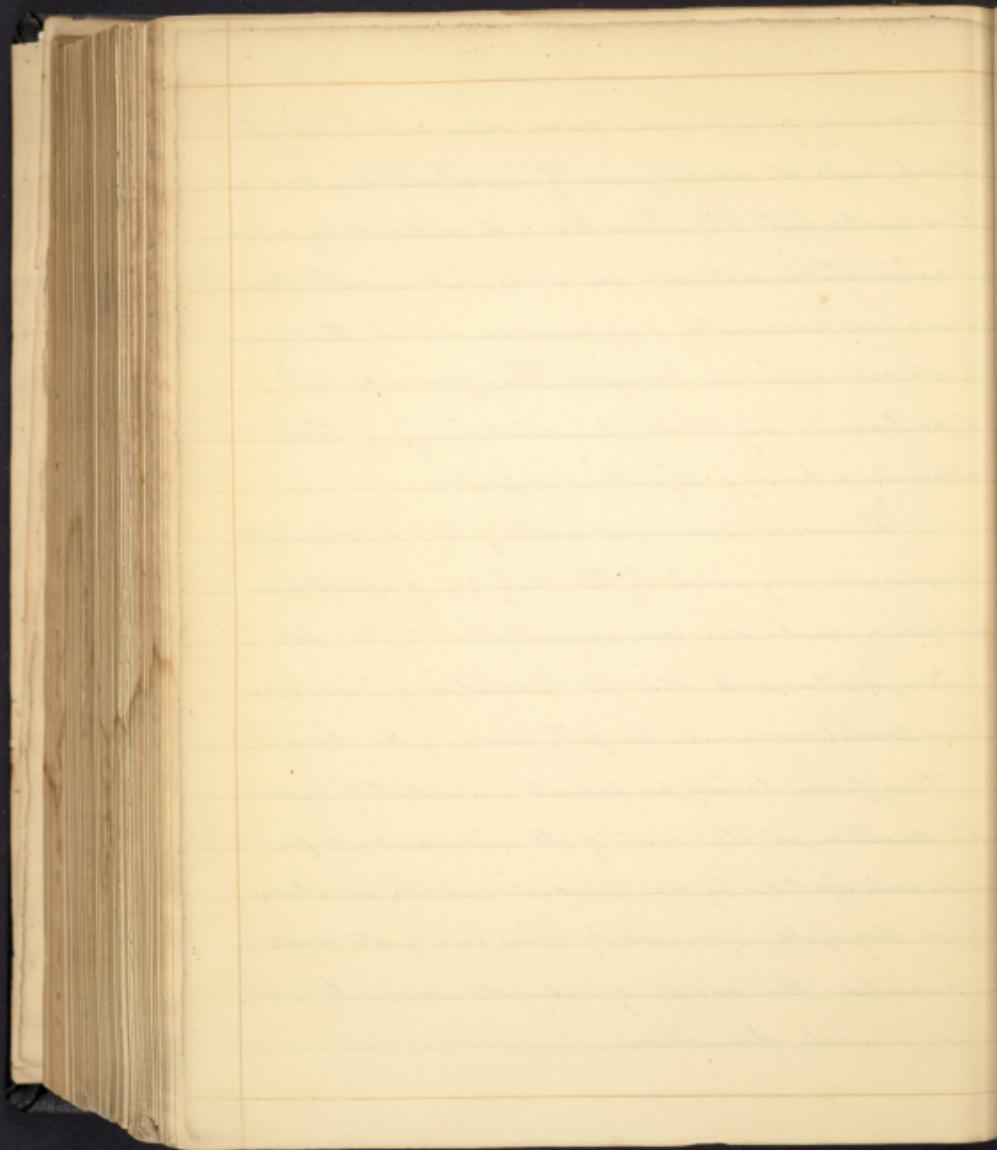
When it has not been arrested by our remedies, and the symptoms are high, attended by inflammation, and violent irritation of the bowels, with considerable pyrexia, great prostration of strength, hiccough, violent vomiting, aphæs, a small quick脉 (pulsus), clammy sweat, cold râbemities, and very feeble and involuntary discharge, Dysentery sometimes terminates fatally in a few days, with all the marks of supervening putrefaction. At other times the disease is much more protracted, and occasionally assumes a chronic form, inducing great emaciation and debility.

I remarked that the discharges, in this complaint, were sometimes without a mixture of blood. When this happens, it is said to be attended with danger, since the bowels are depleted by an effusion of blood, and the inflammation consequently diminishes.



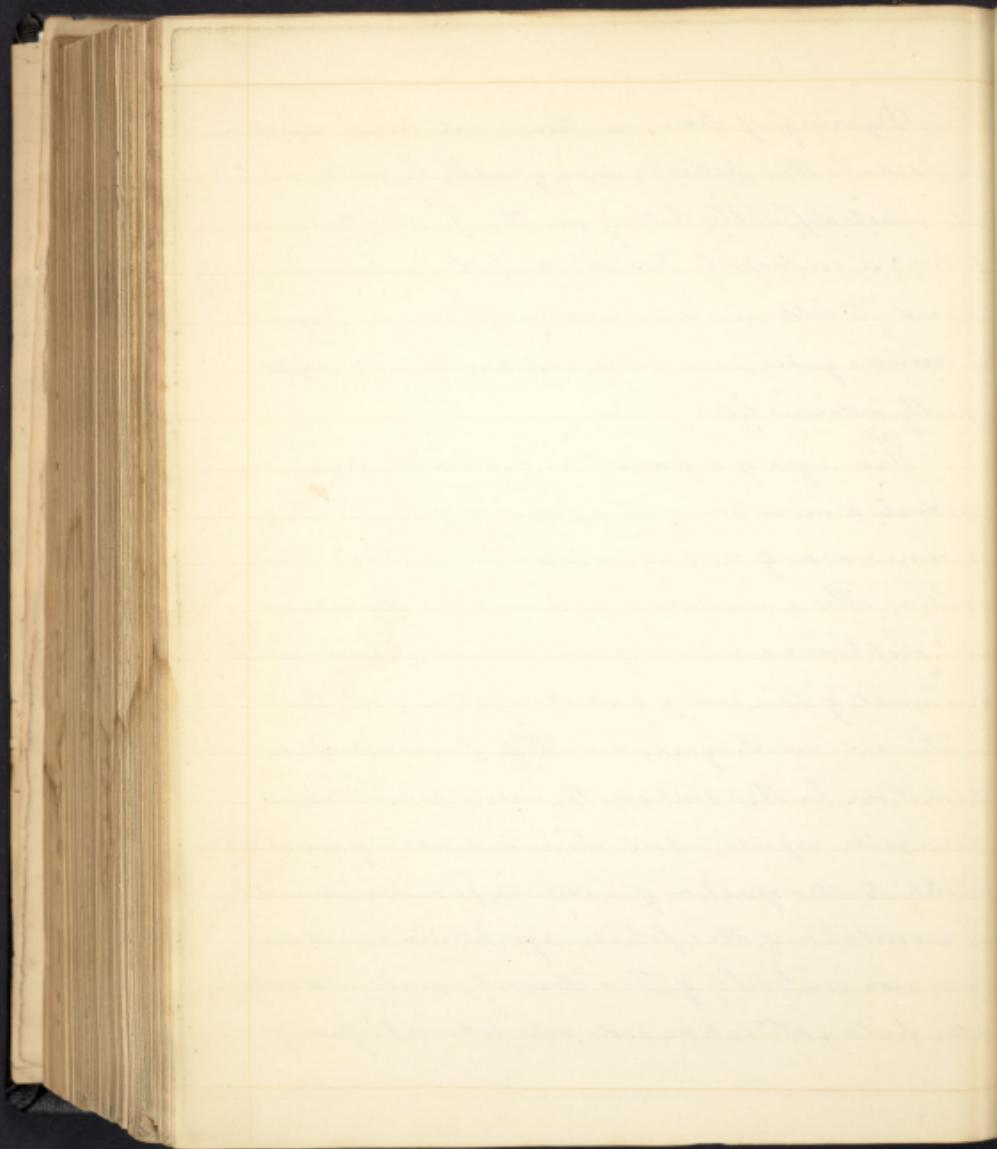
Dysentery of the acute form, when left to itself, I think, runs its course generally, in about ten days or two weeks; but at other times, it continues in a protracted state, not only for weeks, but months together; and occasionally, cases occur, in which the patients are afflicted for years. This gave occasion to Sydenham to say, that the whole mass of bloods, attained a kind of dysenteric disposition.

The continuance and result of the disease, will be governed very much, by the early use of appropriate remedies, and by due care and attention to the sick person, together with the free circulation of pure air. Every practitioner must be fully aware of the benefits, resulting from having his patients immediately under his direction, at the onset of all acute disease; for when early applied, by our remedial resources, we always find they yield more readily. Thus, in a great measure, is presented, the danger of internal accumulation and viseral obstruction.



Dysentery, if taken in time, and proper regard  
be paid to the patient, may generally be cured with  
but much difficulty; but, if in the first place neg-  
lected, or improperly treated, or if the patient be-  
comes to cold or impure atmosphere, it frequent-  
ly occasions great pain, distress, and anxiety, and indeed  
usually endanger life.

The signs of a favourable termination are — a  
gradual diminution of the frequency of the stools, of  
tenesmus, and of griping, while the natural stools  
show also a resumption of pyrexia, a mild and gen-  
tle diaphoresis, a return of rest and composure; with  
removal of pain, and a gradual cessation of all the  
acute and severe symptoms, are to be considered as  
propitious. On the contrary, the case presents an un-  
favourable aspect, where there is a want of suscep-  
tibility to the operation of medicines, accompanied with  
an exacerbation of the febrile symptoms, much dis-  
order and irritability of the stomach, small and irreg-  
ular pulse, alteration and depraved expression of

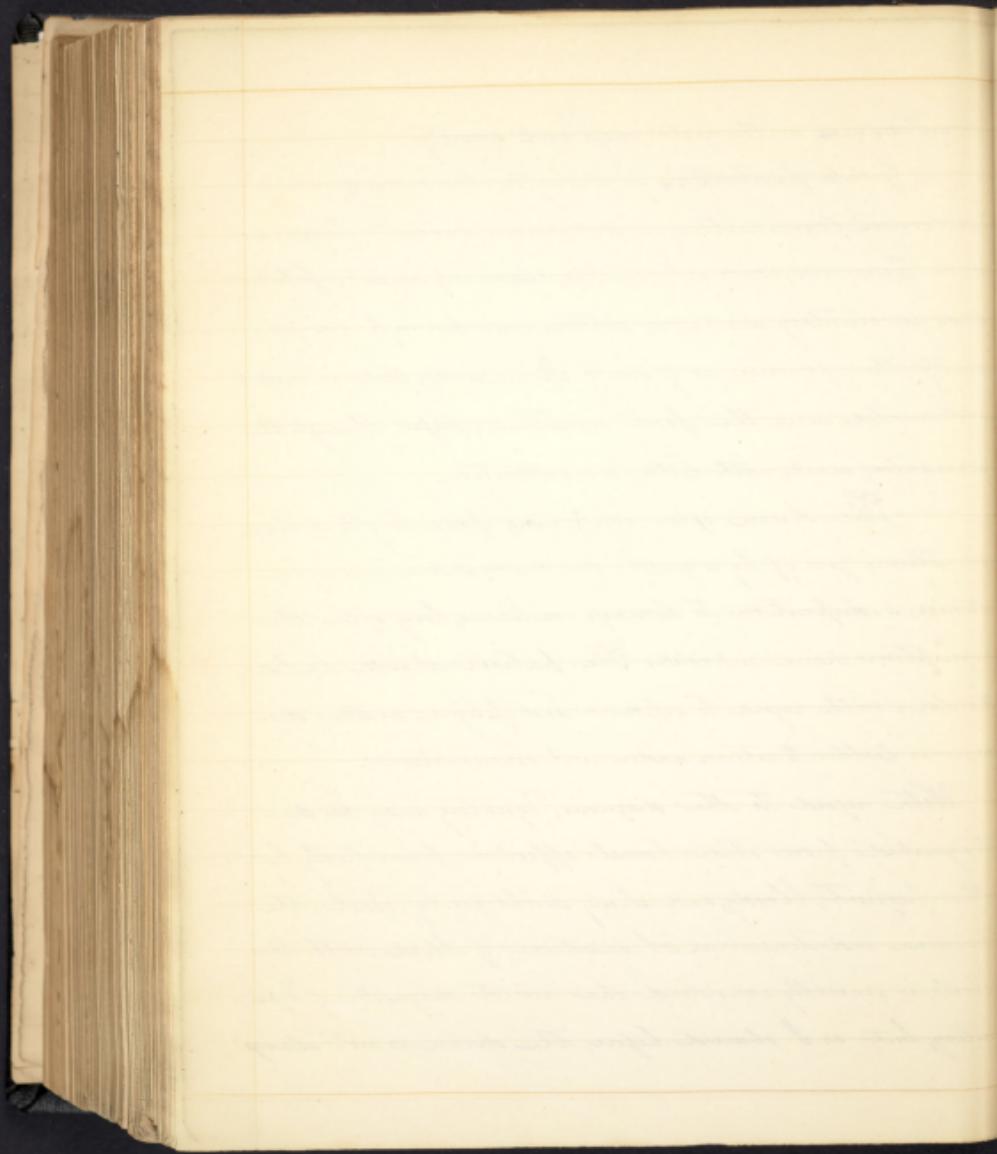


continuance, with restlessness and anxiety.

Great prostration of strength, tension of the bowels, low muttering delirium, violent convulsions, tenesmus, cold extremities, clammy sweats, foetal involuntary discharges, asthma and hiccough, are generally the forerunners of death. It is said, that in violent mortal cases, the food, sometimes, passes through the alimentary canal, with little or no alteration.

The disease after continuing for a length of time, sometimes goes off by a gentle diarrhoea, and in many instances, a disposition to loathing continues, long after the symptoms have subsisted. The patient should be particular, with regard to exposure and fatigue, as the disease is liable to return under such circumstances.

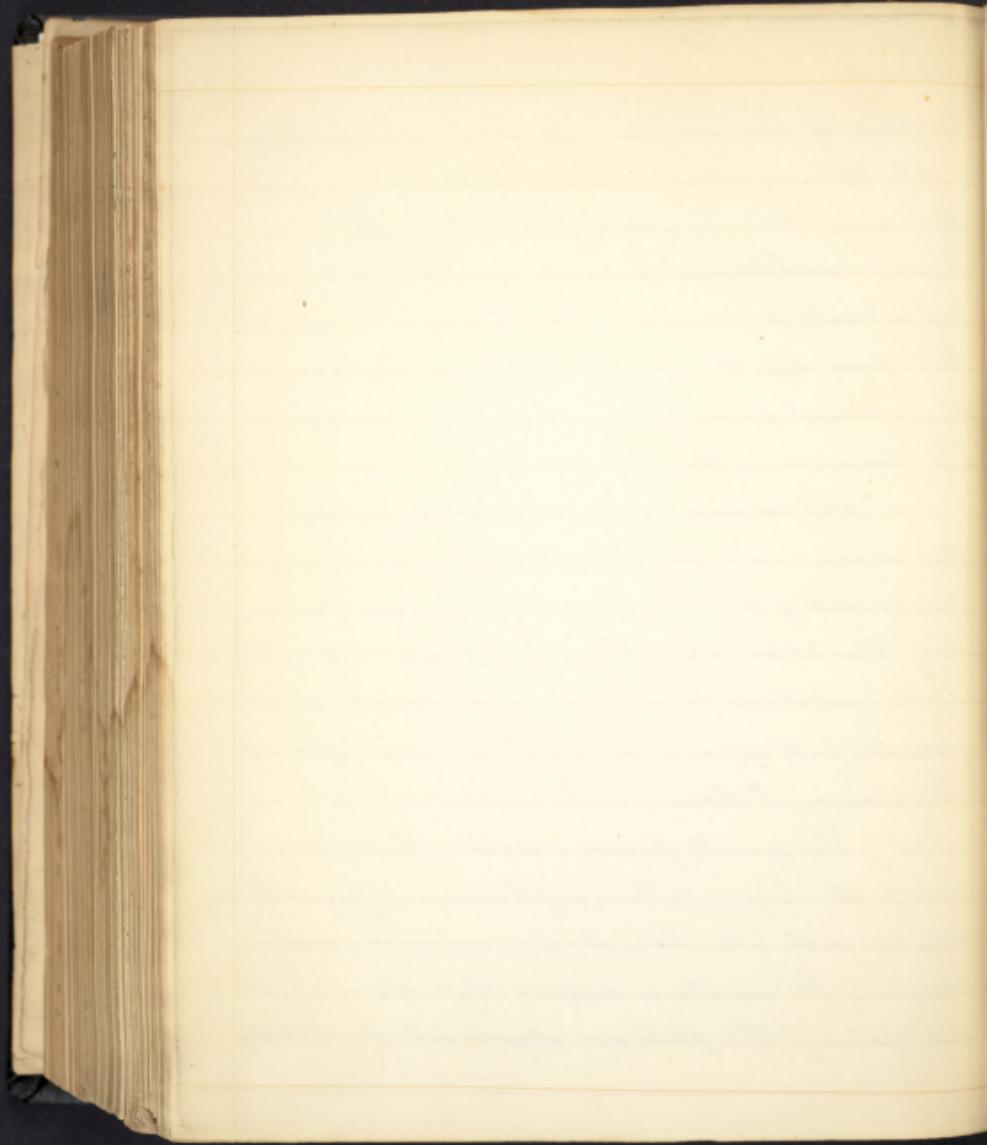
With regard to the diagnosis, Dystery may be distinguished from other bowel affections, principally, by the frequent, bloody, and slimy discharges by stools, the tension and tenesmus of mixture of blood with the stool, is generally considered the most diagnostic of Dystery, but as I observed before, the disease is not always



blended by this symptom, especially at the commencement. We may, however, have bloody discharge from the nose, than an attack of this disease. It has a stronger resemblance, both in its symptoms and mode of treatment, to diarrhoea, than to any other affection. But from this, it may generally be distinguished, in unequivocal forms, by the absence of inflammation and tenesmus in the former.

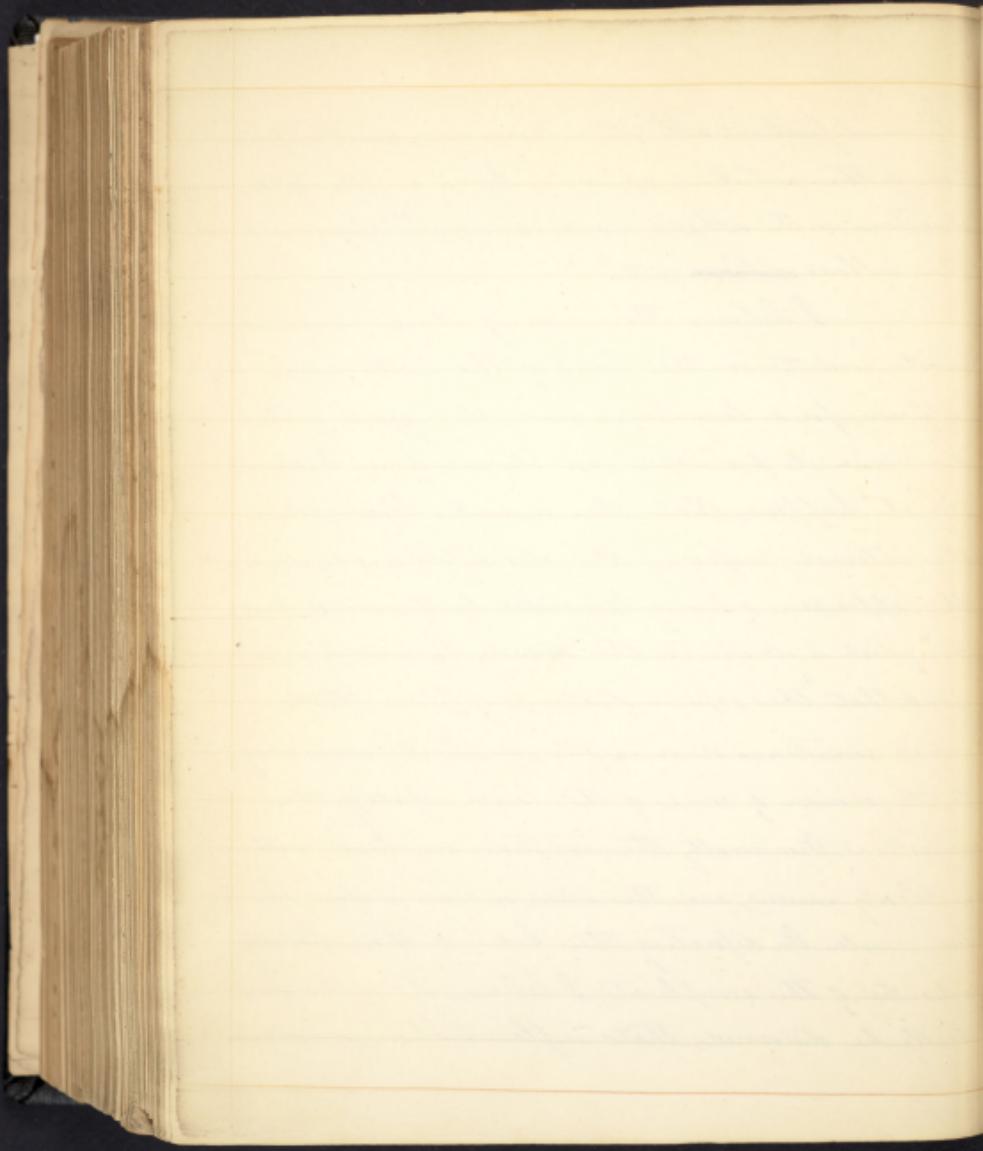
Appearances, on dissection, teach us, that the disease acts its principal force on the intestinal coats of the large intestines, more particularly the colon and rectum. Sometimes, however, the smaller intestines present the most evident marks of disease, and appear most discoloured and inflamed. This, however, I believe, rarely happens.

We generally find, on dissection, the villous coats of the large intestines, inflamed, and frequently affected with ulceration, abrasion, contraction, or modification. It sometimes happens, that the texture and shape of the parts, are almost entirely oblitera-



by mortification. At other times, considerable portions of the intestines appear to be in a state of contraction, with adhesions, and occasionally abscission of the villous ~~and~~ <sup>and</sup> coats.

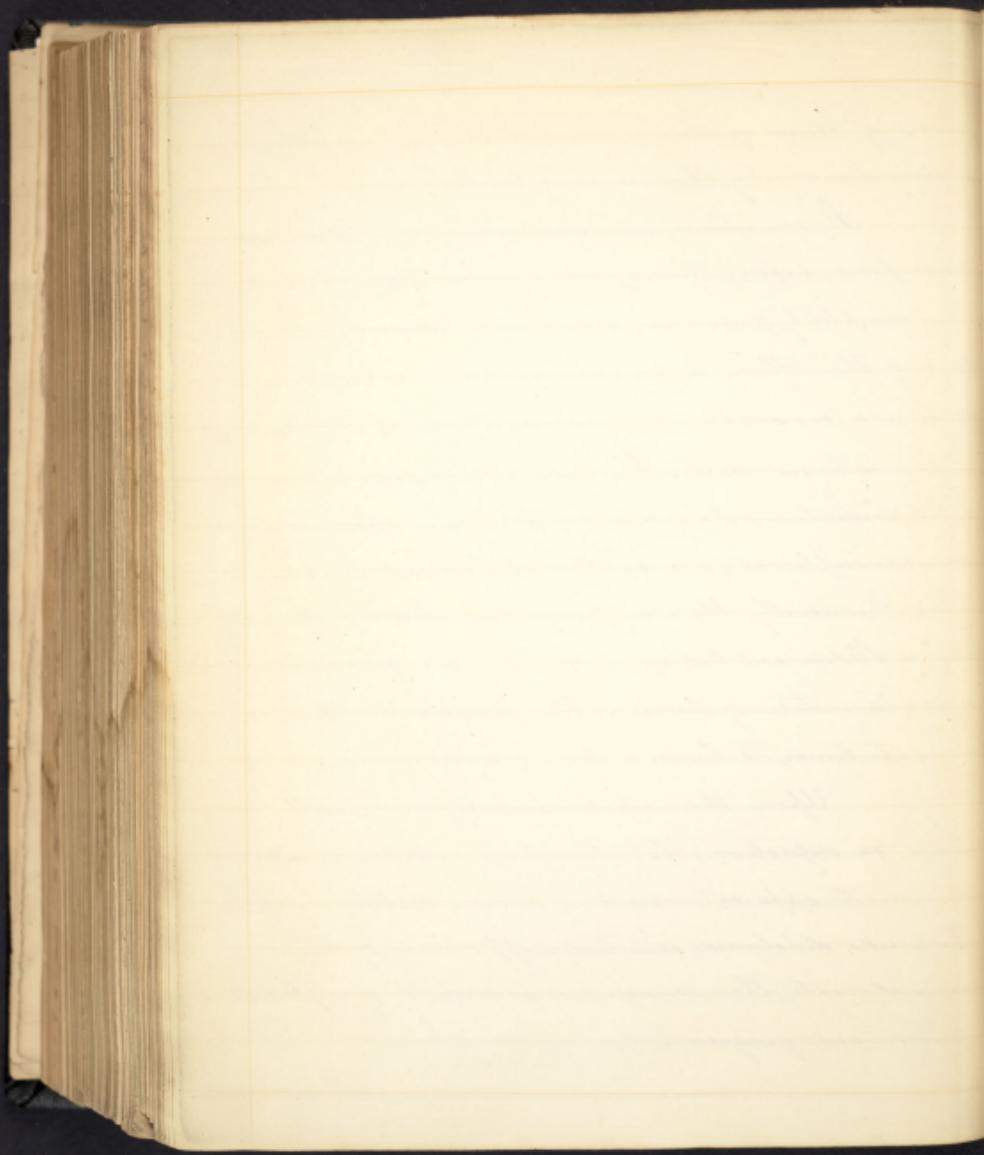
I believe that signs of ulceration are most evident in the bowels of those, who have suffered, for a long time under the effects of the disease, in its protracted and chronic form. Occa-  
sionally it happens, that the minute bloodvessels, on  
the intestinal surface of the alimentary canals, wear  
the appearance of having been crossed by the acrid ma-  
ter, which is secreted in this disease. Sydenham sup-  
poses that the copious discharges of pure blood,  
which sometimes occur in this complaint, are owing  
to the erosion of some of the larger vessels of the  
intestines. Occasionally, the intestines are lined with  
a bloody mucus; and the veins, on their surface, ap-  
pear swollen. On dissecting the bodies of those patients  
who die of this complaint, I believe, it will gen-  
erally be discovered, that inflammation, or conges-



tion of some of the abdominal viscera, was either  
justly or indirectly the cause of death.

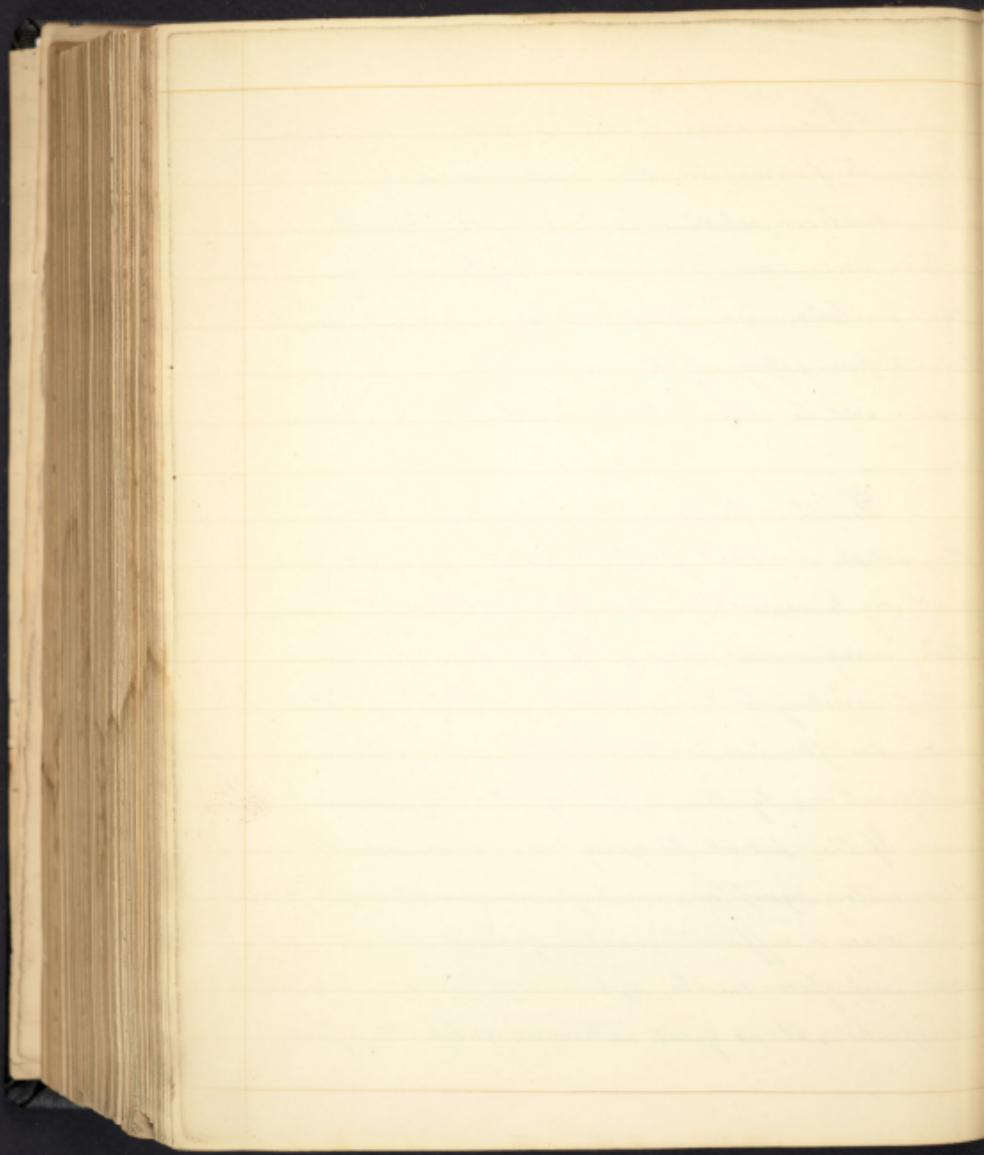
It sometimes, in伏ociaty, happens, that death  
takes place, before the system has had time to react,  
being completely prostrated, and overwhelmed by the vi-  
tue of the attack. Under such circumstances, one frequently  
finds a considerable degree of congestion about some  
of the internal parts. The liver not unfrequently ex-  
hibits evident marks of disease, sometimes appearing ten-  
der and inflamed, and on other occasions, very much en-  
larged. Occasionally, the inflammation extends to the  
urinary bladder and kidneys - and then, we find these  
organs in a state of disease. The peritoneum, likewise,  
seems at times, to be in a state of inflammation.

Upon the whole, however, we generally  
find, on dissection, that the large intestines manifest  
the most apparent marks of disease, denoted by the  
thickened, discolored, and tender appearance of the  
internal coats, the consequence principally of inflam-  
mation and gangrene.



I now come to the method, which it is  
proper to pursue in the treatment of Typhus.  
The indications, which present themselves, in the cure  
of this disease are - to remove inflammation, with  
the irritation and spasms consequent to it; to ob-  
tain a free passage of the contents of the alimentary  
canal; and to restore to the skin its usual healthy ap-  
pearance.

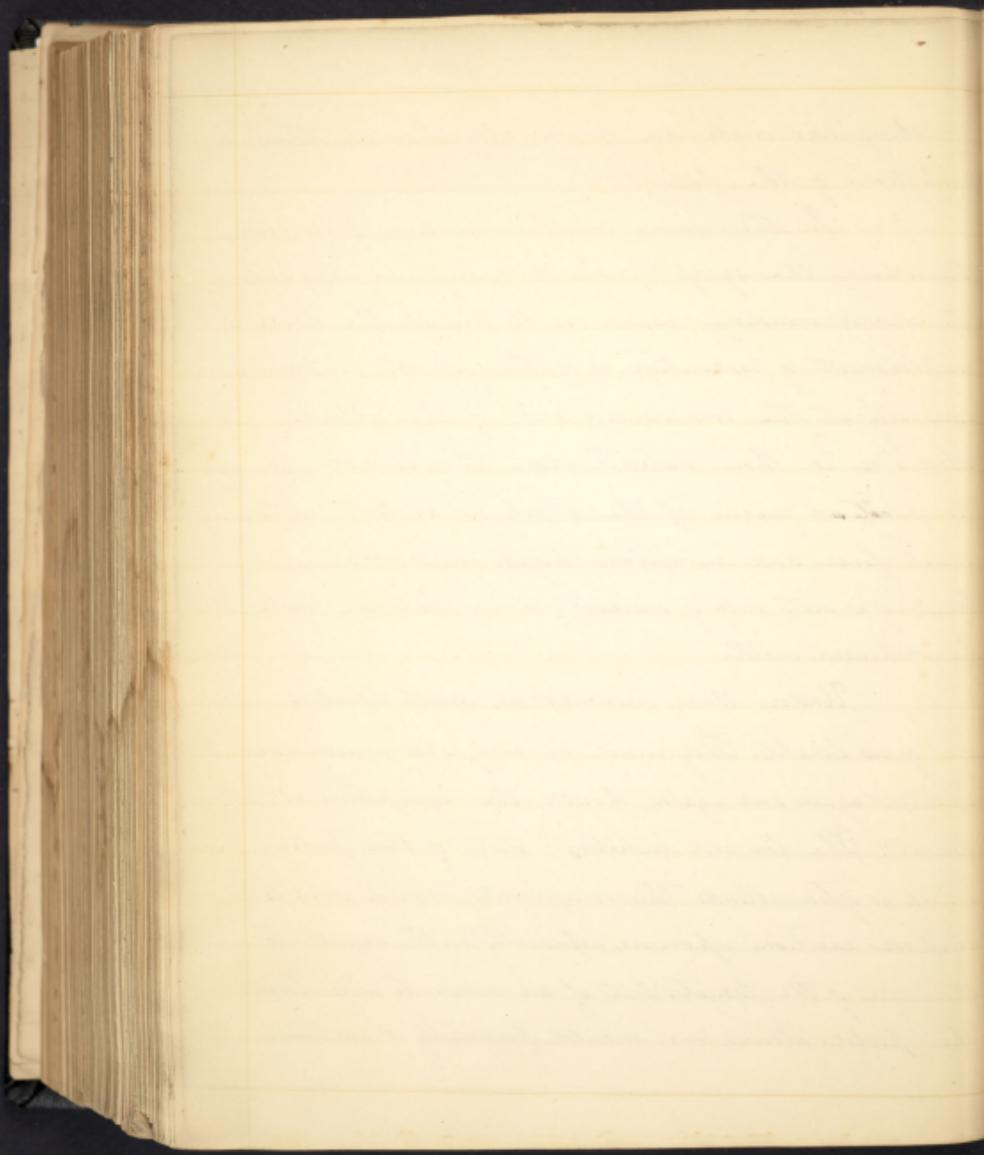
For the purpose of removing this affection, when  
the attack is violent, I think no remedy equal in point  
of efficacy to venesection, promptly employed. It is true,  
that many violent cases of Typhus, have been cured  
without resorting to this method; yet I believe that the  
disease has often terminated fatally, in its more severe  
modifications, by the neglect of this important mea-  
sure. If the patient be young and vigorous, and the in-  
flammatory symptoms run high, we should on our first  
visit, draw a sufficient quantity of blood, to make a de-  
cided impression on the system; and the operation should  
be repeated, at no great interval; unless the first



bleeding has made an obvious alteration in the condition of the patient.

In the more northern sections of our country, where the symptoms are very inflammatory, and the disease exceedingly rapid in its progress, the liberal employment of asecession is of the utmost importance, especially at the commencement of the attack. And even in those districts, where the climate is temperate and warm, if the attack be violent, with much fever, and symptoms highly inflammatory, bleeding is not only of eminent service, but can hardly be dispensed with.

Under these circumstances, small bleedings are of no benefit. They must be early and copious and repeated again and again, should the symptoms call for it. The low and indistinct state of the pulse, which so often attends this complaint, would seem to impose caution upon us, especially with respect to the use of the lancet, but if we were to judge from the pulse alone, we should frequently draw in-

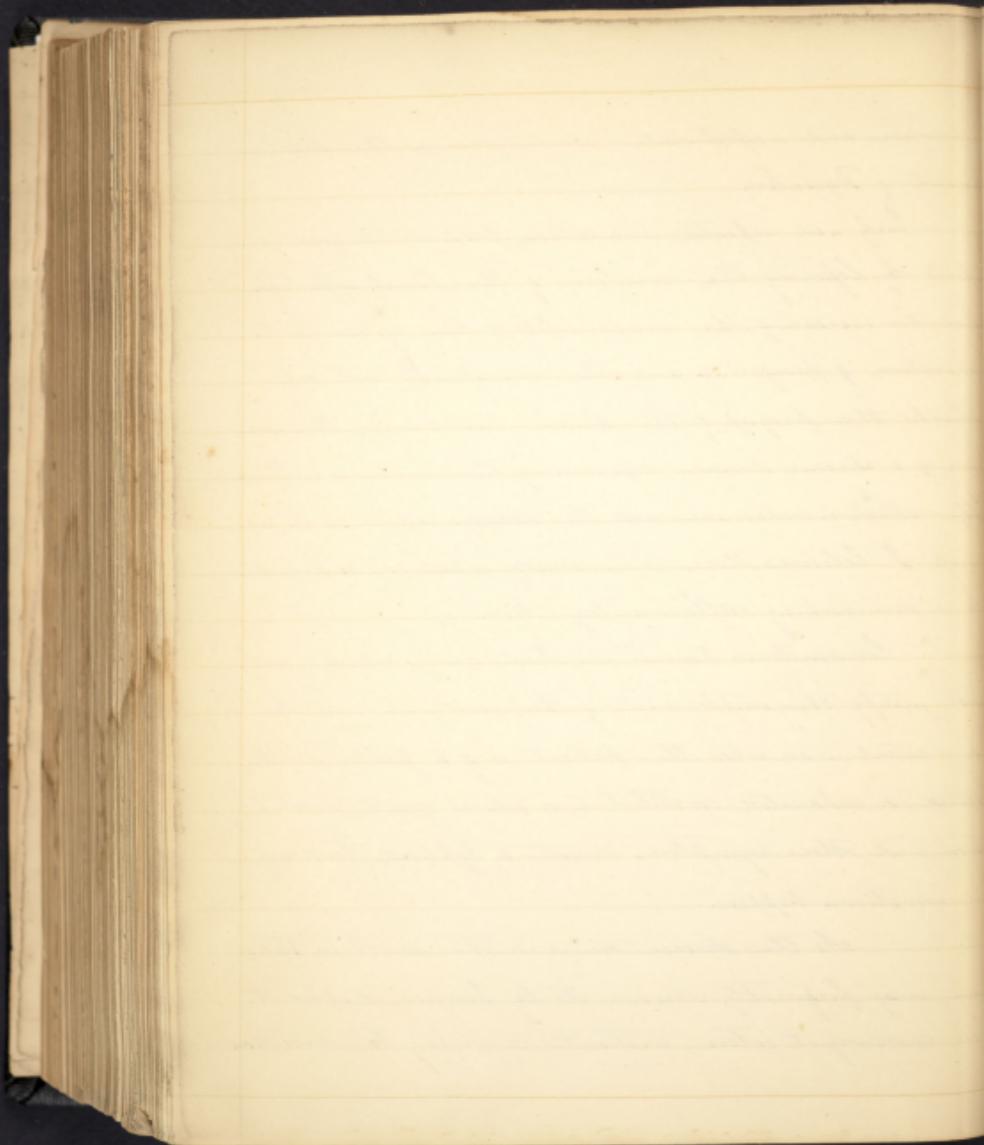


proper and unfortunate conclusions in the treatment of Dysentery.

Early and repeated resection, produces its good effects, by lessening the virulence of the bowel affection, and by increasing the susceptibility of the system to the operation of purgatives and other remedies. It not only checks the progress of the disease, but prevents the development of a chronic disorder, supervening the acute one. When the attack is vehement, and the disease rapid in its progress, I believe there is no remedy, which acts so promptly in diminishing inflammatory action.

Circumstances however sometimes occur, which would not justify the employment of this remedy, at least to any extent, as, when the patient is of a feeble, debilitated, or exhausted constitution, or where great prostration, and other symptoms denote a typhoid tendency, as sometimes happens.

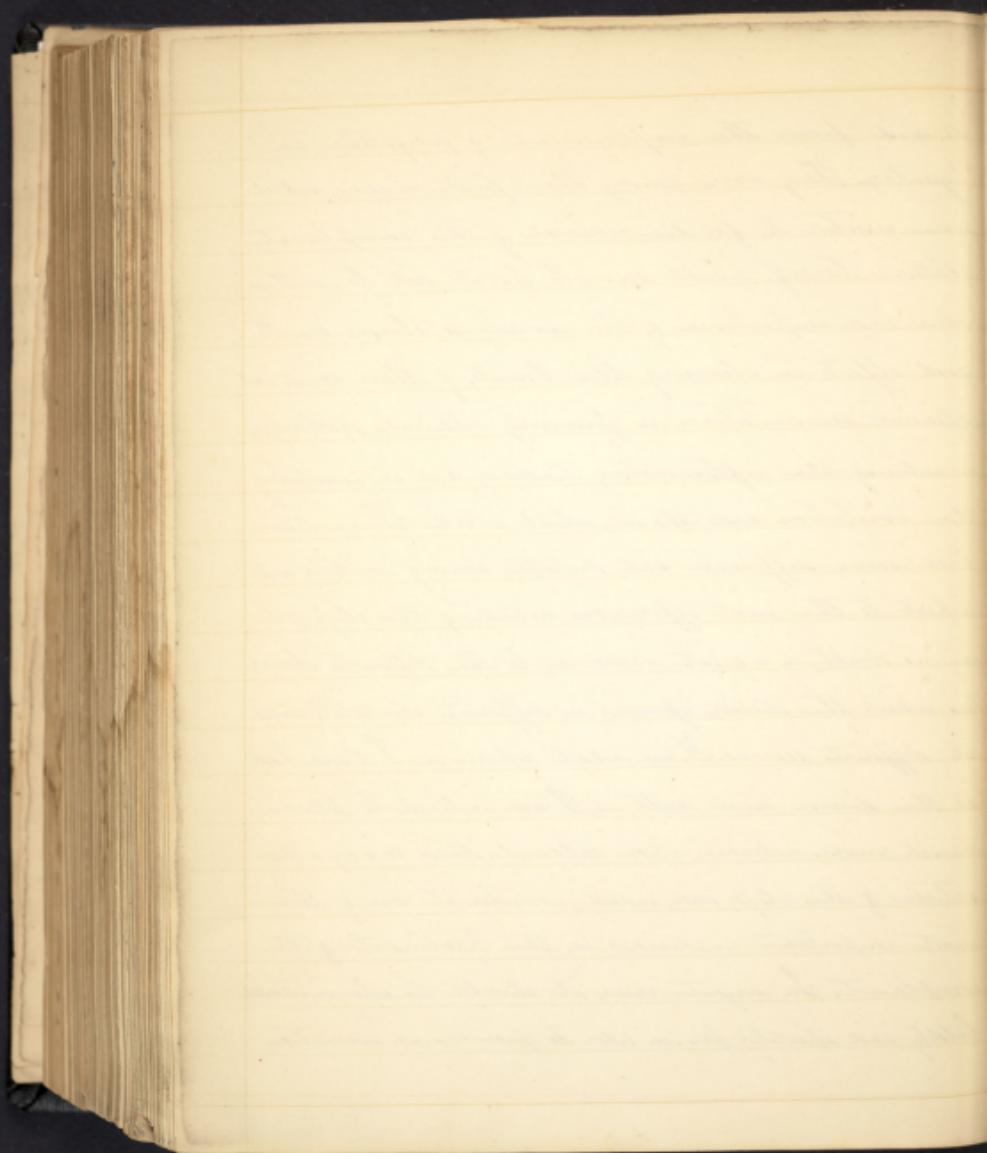
As the disease occurs in the southern states, we may frequently remove it by purging, diaphoretic, mercury, &c. &c., without recurring to resection.



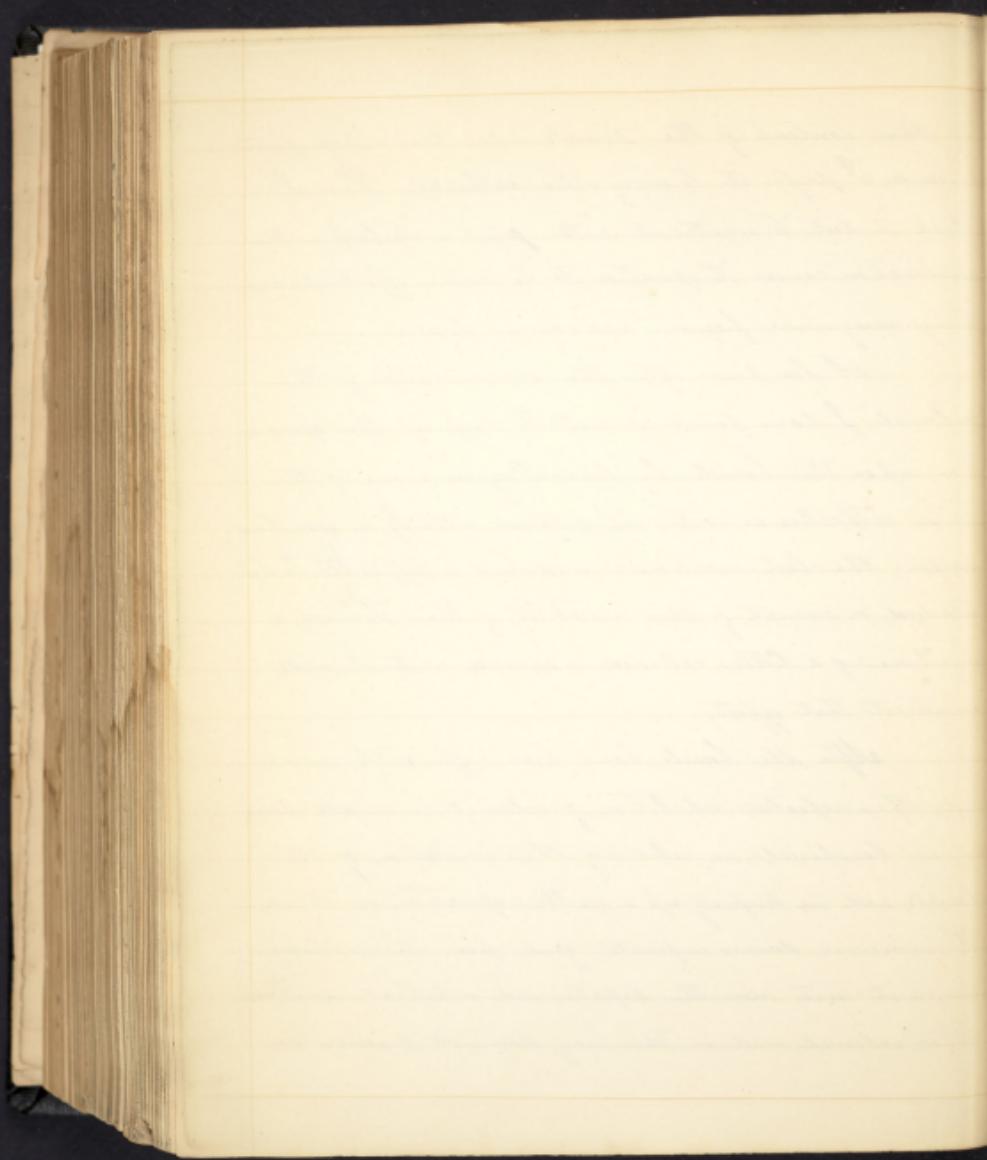
at all. This, however, should by no means prevent our using it, whenever the necessity of the case may seem to require it.

Where there is much nausea, and fullness of the stomach, I believe that the early exhibition of an emetic, is very beneficial, as it operates by relieving that organ, of its offensive and irritating contents; and so assists in the evacuation of the contents of the bowels, when followed by a cathartick.

Specchuumba and Tatar emetics, either alone, or in combination, are generally employed for this purpose. Their operation is to be promoted, by drinking warm water or Chamomile Tea. It is stated by Lallemand and Jangle, that emetics are most successful, when they operate, likewise, by stool. Of this I know nothing, ever having administered them with that intention. A combination of an emetic with a cathartick, is sometimes very useful, in evacuating the contents of the bowels, and breaking up the spasm, which exists in them. All authors agree in the vast utility, which may be



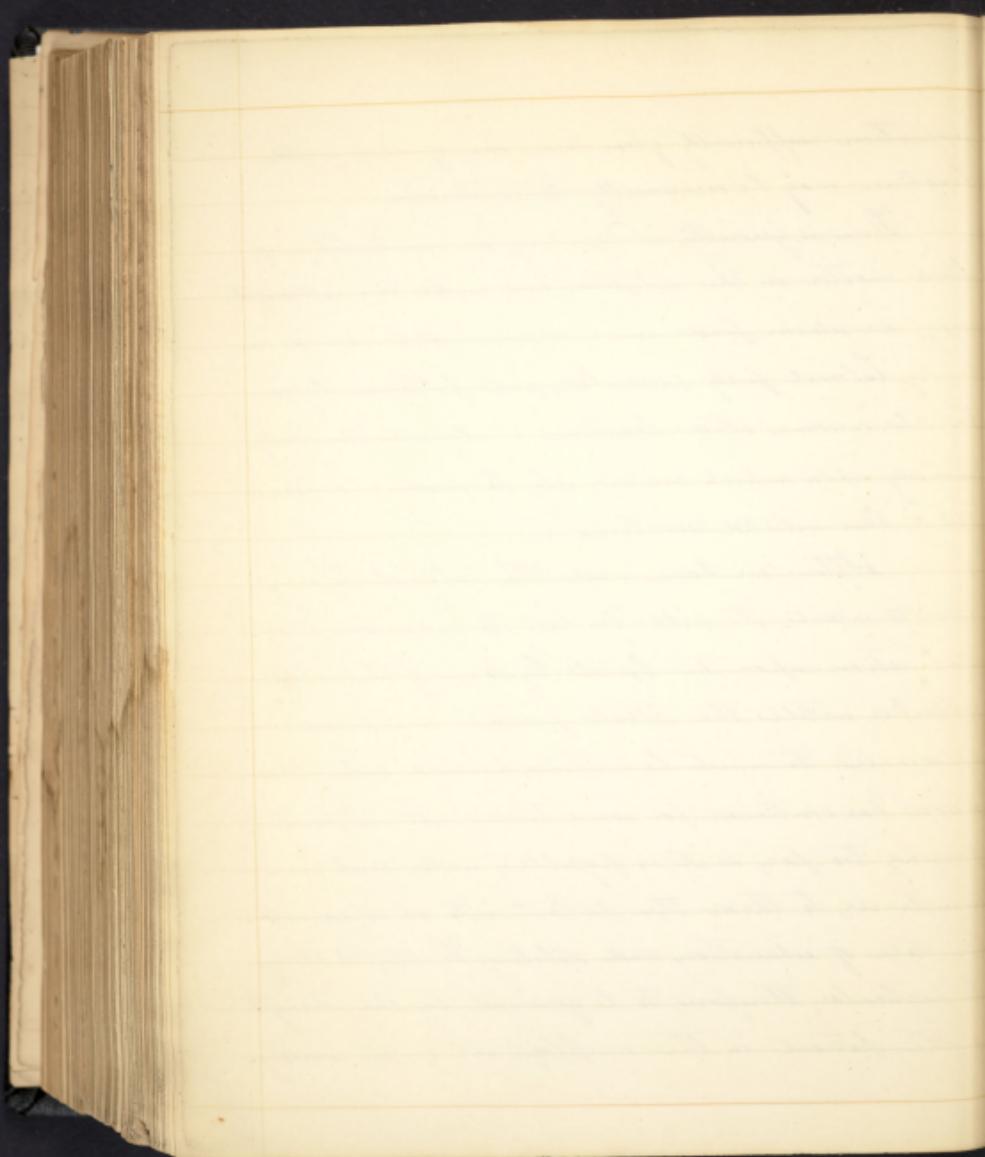
derived from the employment of purgatives in  
Tyzzer. They were among the first means, which  
were resorted to for the removal of this complaint.  
Nature herself, would seem to point out to us the  
use and importance of this remedy, so obvious are its  
good effects in cleansing the bowels of their acrid and  
offensive accumulations, in procuring natural discharges,  
in reducing the inflammatory tendancy, and in removing  
the irritation and spasms, which attend. There have  
been some difference and dispute among writers, with  
respect to the most efficacious article of this class; owing  
no doubt, in a great measure, to the different charac-  
ters, which the disease assumes in different climates, and  
at different seasons. From what experience I have had,  
is the disease occurs with us, I am induced to place  
much more reliance upon calomel, than on any other  
article of this class; and, indeed, consider it one of the  
most important medicines in the treatment of the  
complaint. In urgent cases, it should be administered  
boldly and speedily; for in order to procure an evacuation



of the contents of the bowels, when the attack first comes on, I prefer it to every other cathartic. Then, I think it best to unite it with opium or rhubarb, as the combination causes its operation to be more effectual, and brings away more frequent and copious purges.

A few hours after the administration of the calomel, I have found it well to keep up the operation upon the bowels, by prescribing some one of the milder cathartics, as castor oil a spoon salte. If as sometimes happens, the last mentioned medicine is difficult to be retained, on account of the irritability of the stomach, a mixture of a little calined magnesia with it, will counteract that effect.

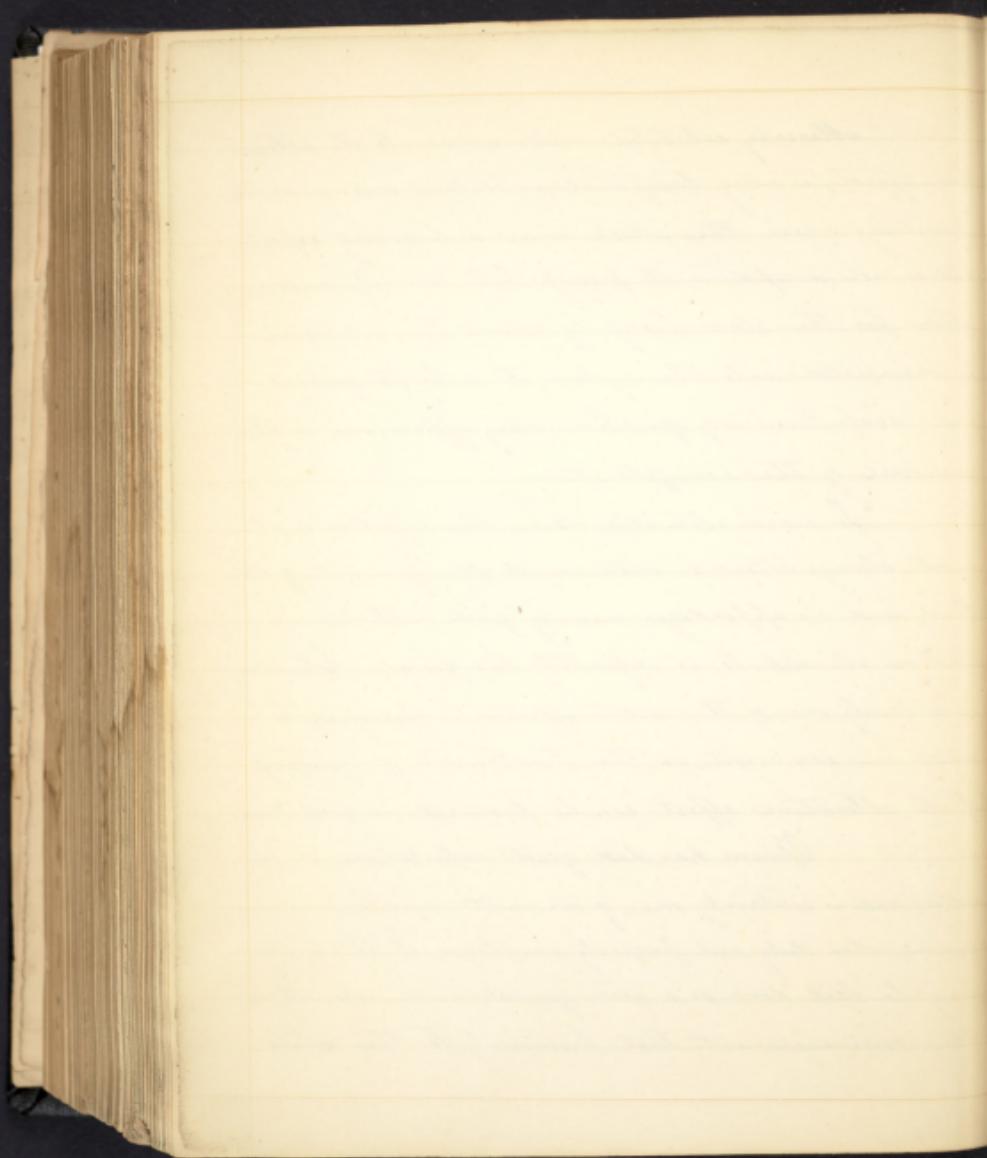
After the bowels have been sufficiently evacuated, the repeated exhibition of calomel in small doses, is very beneficial, in relieving the irritation of the bowels, and in keeping up a gentle operation on them. It, moreover, derives infinite good, from the influence which it acts over the hepatic and intestinal secretions. When calomel, used in this way, does not produce an



vacuation sufficiently free, some one of the mild laxatives may be occasionally administered.

There is, generally, in Typhus, an accumulation of black matter in the intestines; and until this is brought away, we seldom find much advancement towards recovery. Salomet freely prescribed, and followed by castor oil, or some other laxative, is almost the only remedy upon which we can rely, to produce a removal of this vitiated secretion.

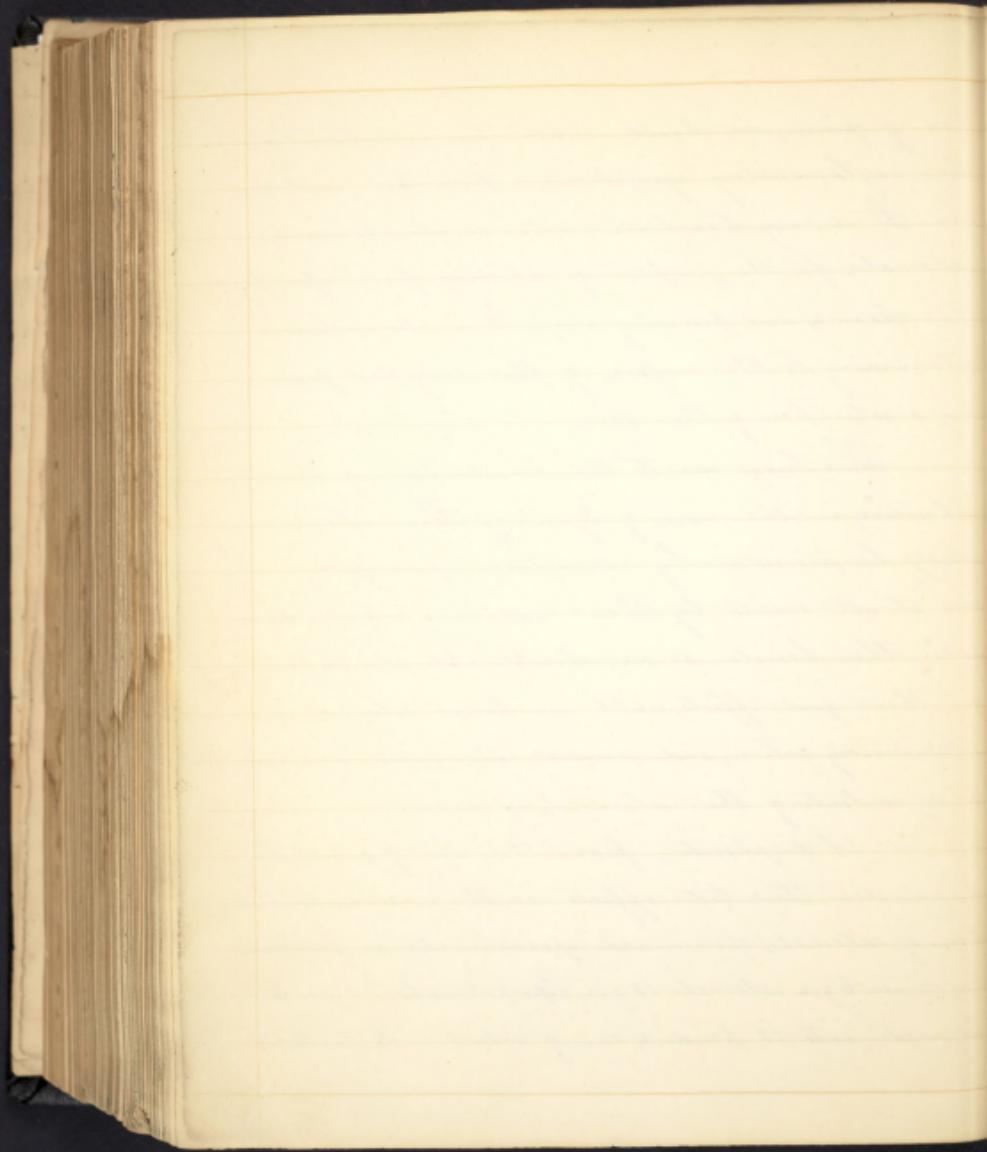
After we have used the salomet to a sufficient extent, it will be best to maintain a regular action upon the bowels by some of the mild aperients, until the stools present a natural appearance. We must be cautious, however, after the disease has continued for some time, not to push purging too far, as it is possible, under such circumstances, to throw the patient into an irrecoverable state of exhaustion and debility. We should always be particular, therefore, to be governed by the strength of the patient in the employment of this remedy.



Mercury exhibited with a view to its alterative effect, is very beneficial in certain cases of acute dysentery, where the attack nears a lingering aspect, and is not so rapid in its progress, but that it will allow for the slow process by which this medicine is introduced into the system, it is, by its general and revolutionizing operation, very efficacious in the removal of the complaint.

In warm climates, where this affection is almost always attended with much derangement of the liver and its appendages, mercury given with the intention alluded to, is infinitely beneficial. Salivation is certainly one of the most effectual measures, to which we can resort, in the treatment of dysentery, if its alterative effect can be produced in good time.

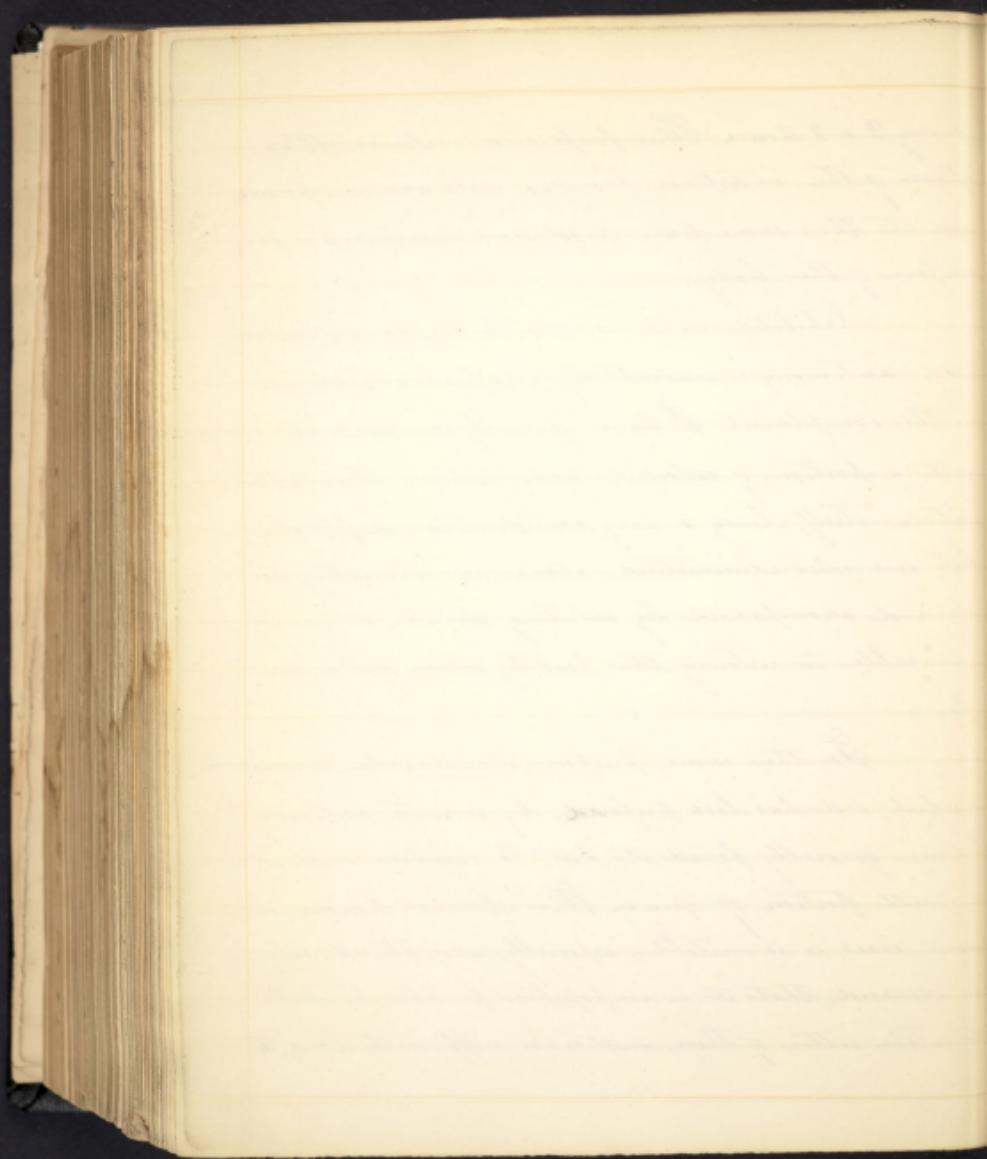
Opium has had great reputation in dysentery, and is certainly one of our most important remedies, when duly and properly employed. I think it may be laid down as a good general rule, especially in the commencement, that previously to the abhi-



tion of opium, we should make the reduction of the inflammatory symptoms a principal indication. It is very beneficial, when combined with calomel, for the purpose of relieving pain,安静ing the spasms, and promoting sleep. It is also useful in stimulating to the surface of the body, and producing a relaxation of the skin.

This brings me to the consideration of Diaphoretic, in the cure of Dysentery. These should always be preceded by aperients, if necessary; and at all events, by those medicines, which evacuate the bowels, as we should not calculate on their good effects, until we have subdued its inflammatory action, and removed the acrid and irritating contents of the alimentary canal.

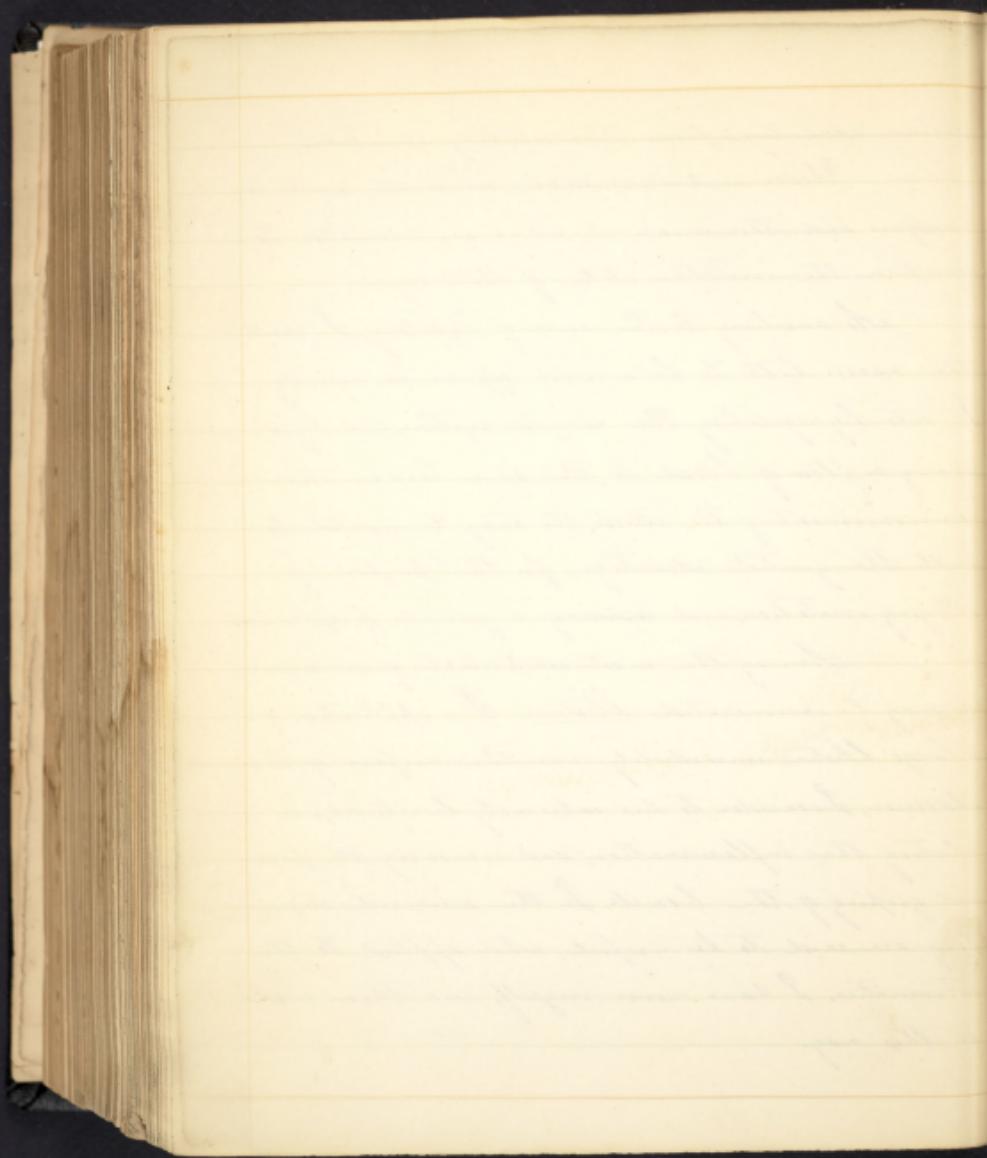
At diaphoretic, from the use of which, I have seen the best effects result, is a combination of calomel, opium, and ipecacuanha, as follows: Rx. opium 6 grs. calomel 13 grs. ipecacuanha 20 grs. to be made into 12 powders, one of which is to be taken



every 2 or 3 hours. This preparation relieves the spasm of the intestines, provokes rest and composure, and at the same time produces a moisture on the surface of the body.

Exhibited with a view to diaphoresis, tartarised antimony is undoubtedly, a valuable medicine in this complaint. I have generally combined it with a portion of calomel and nitre, the latter article itself, being a very considerable diaphoretic; but even when administered alone, in sweating doses, and accompanied by diluting drinks, it is very serviceable in restoring the healthy action of the surfaces.

For the same purpose ipacashneha is very useful, and has been preferred by some to antimony. I have generally found it best to combine with it a small portion of opium. The stomach, however, in some cases, is so irritable, especially when the disease is advanced, that it is impossible for the patient to retain either of these medicines sufficiently long, to

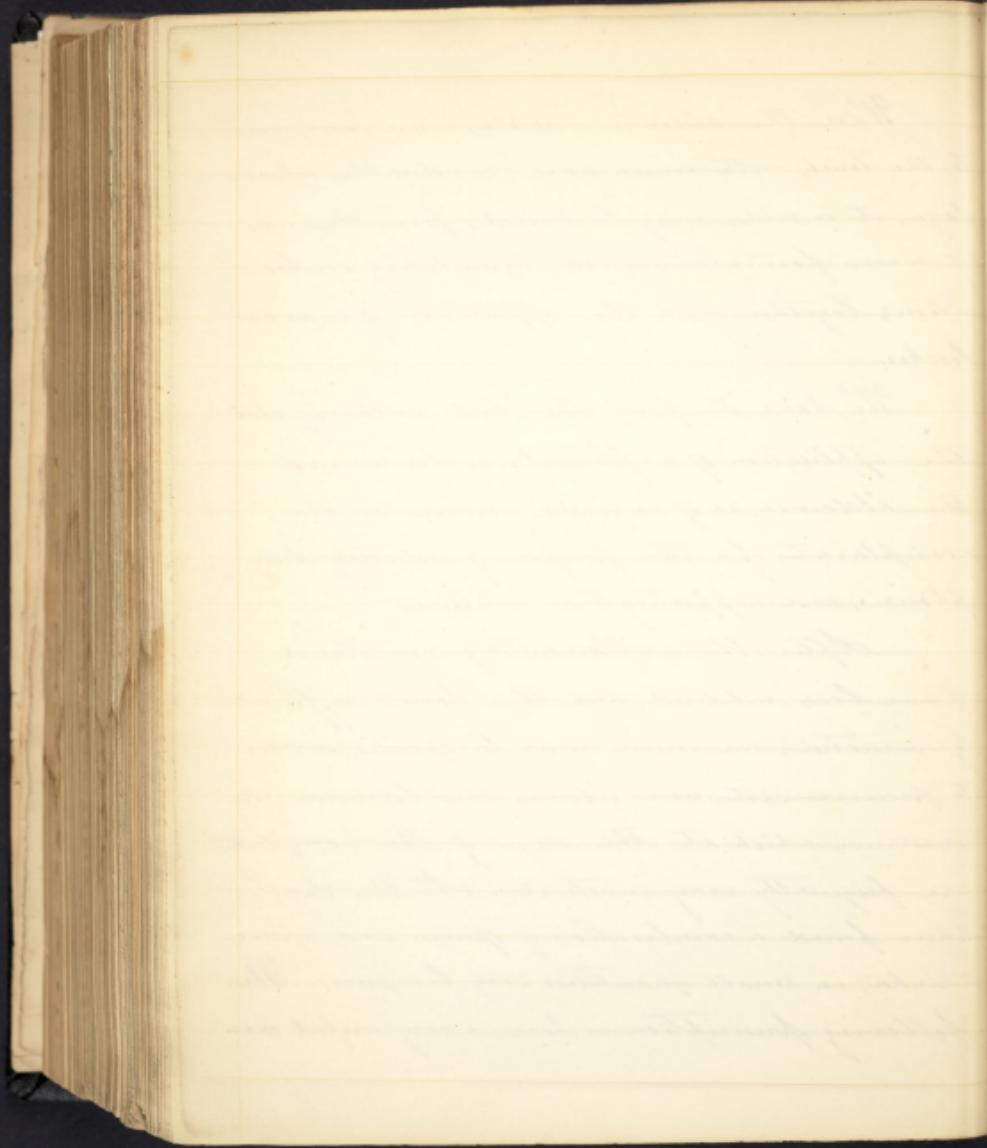


some advantage from their salutary operation.

Under such circumstances, we must resort to sudorifics and other measures, which are calculated to unplug the irritable state of that organ.

As auxiliary to the cure of Typhus, I consider the warm bath to be a most efficacious remedy. It acts by regulating the vascular system, and by inducing a flow of blood to the skin. Even in the commencement of the attack, it may be resorted to with the greatest advantage, for the purpose of allaying irritation, and inducing a general perspiration.

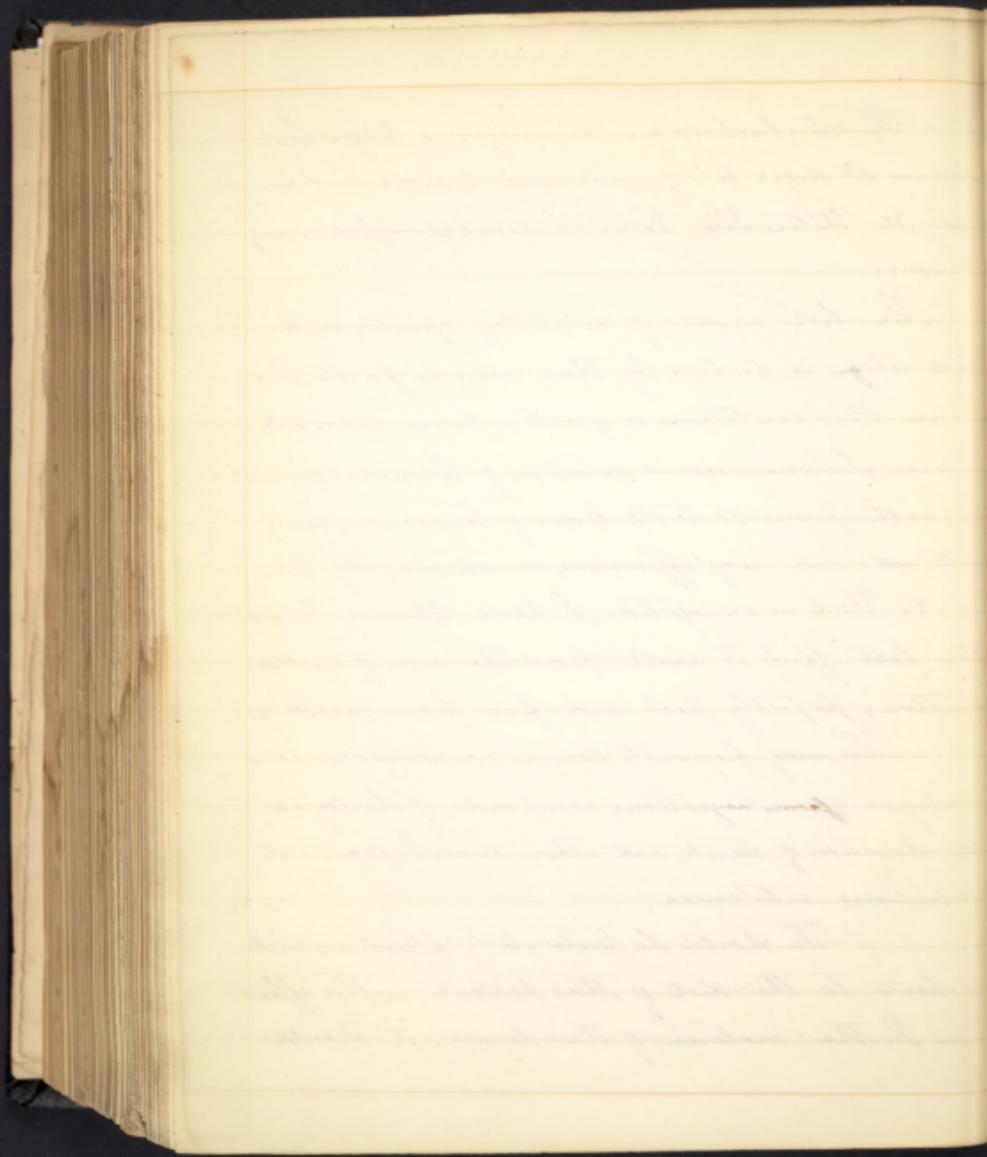
Among the most important of our weapons, may be enumerated blisters. The application of large blisters, immediately over the surface of the abdomen, I consider to be extremely beneficial, in allaying the inflammation, and removing the pain and griping of the bowels. In the advanced stages, they are said to be useful, when applied to the extremities. I have never myself seen them used in this way.



When the abdomen is swollen, tense, and sore to the touch, with much pain, considerable advantage, it is said, may be derived from the use of warm fomentations, and stimulating emulsions, together with the application of cups and leeches.

We have it from the best authority, that the application of a flannel roller around the abdomen, is of infinite service in the complaints, for the purpose of inducing diaphoresis, and supporting the intestines.

After the inflammatory symptoms have been subduced, and the bowels sufficiently evacuated, we must recur to opiates, in order to procure rest, and relieve the lamina and tenesmus, which at this stage of the complaint, are frequently very inveterate. At this stage, I have found a combination of opium and specacuanha, in small quantities very beneficial. The following prescription is here, a very useful one:

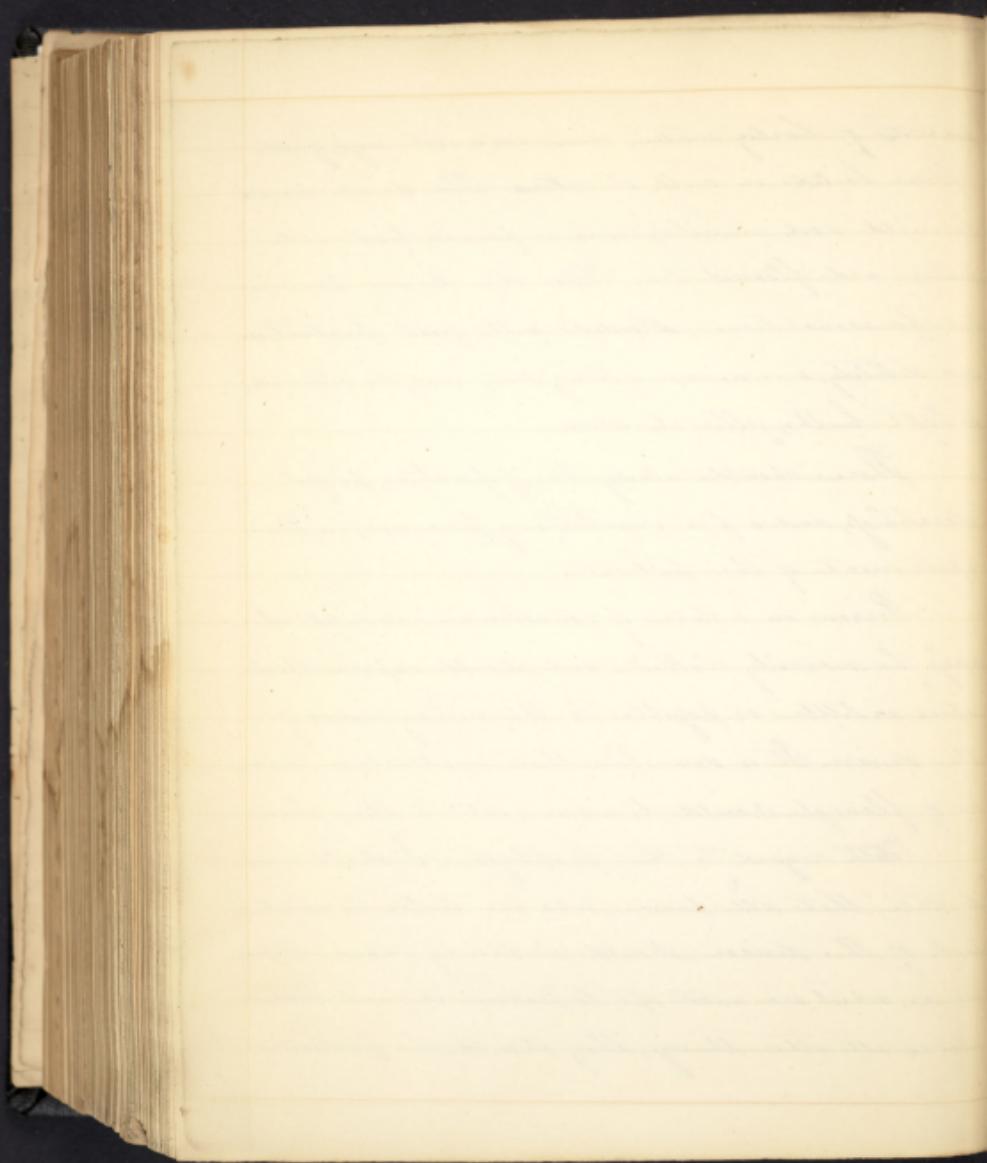


R. rhubarb 10 gr. cal. magnesia 31 gr. lau-  
danum 15 drops oil of anise seed 6 drops. loof sa-  
gar 31. Water 3iii. Dose. of a dessertspoonful every  
3 hours.

The best mode of exhibiting opiates, in the  
last stage is perhaps by the rectum; for at this  
time the irritation is greater here than else-  
where. I have seen a decoction of flaxseed, combin-  
ed with from 50 to 100 drops of laudanum, easily  
retained, and very efficacious, in relieving the pa-  
tient. Used as an injection, I have likewise known,  
the best effects to result from the use of melted  
butter, perfectly fresh and free from rancidity.

We may frequently derive considerable ad-  
vantage from injections, composed of barley wa-  
ter, decoction of starch, and other mucilaginous and  
nutritious substances.

We should be particularly attentive with  
respect to the diet of the patient, in this affec-  
tion. In the violence of the disease, it should

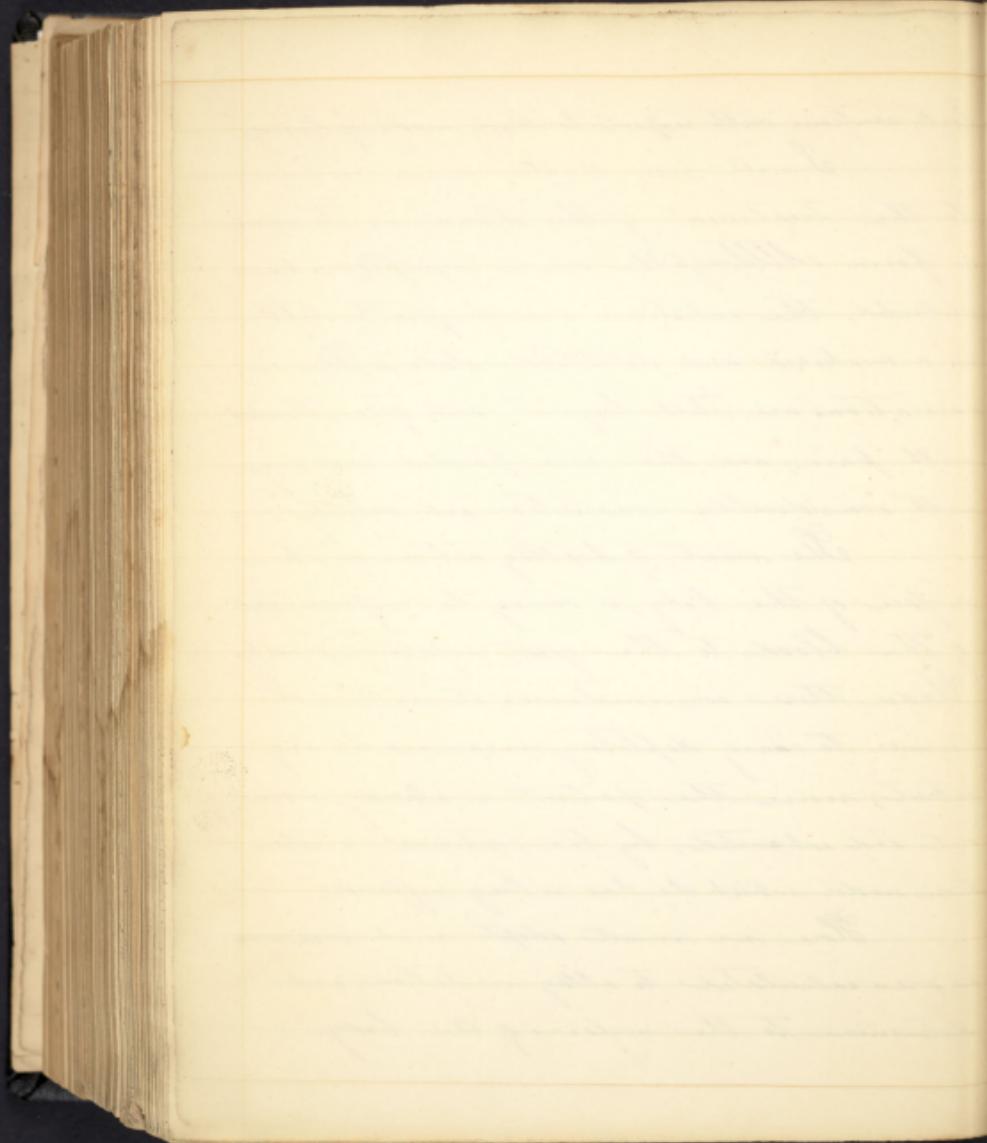


consists of barley water, rice, arrowroot, sage, ginger, flour boiled in milk & cotton. The drinks should be mild and nutritious, as posset, toast and water, and flaxseed tea. When the disease subsides for some time, attended with great prostration and debility, a more nourishing diet may be allowed, light broths, jellies &c &c.

There should always be, if possible, perfect cleanliness, and a free circulation of pure air, in the apartment of the patient.

Persons in a state of convalescence should always be warmly clothed, and should expose themselves as little as possible to the outing causes of the disease. It is desirable that waistcoats or drawers of flannel should be worn next to the skin.

With regard to the prophylaxis, I shall merely state, that all persons, who are liable to an attack of this disease, should studiously avoid those causes, which are most apt to produce it; and that above all other things, they should be particu-

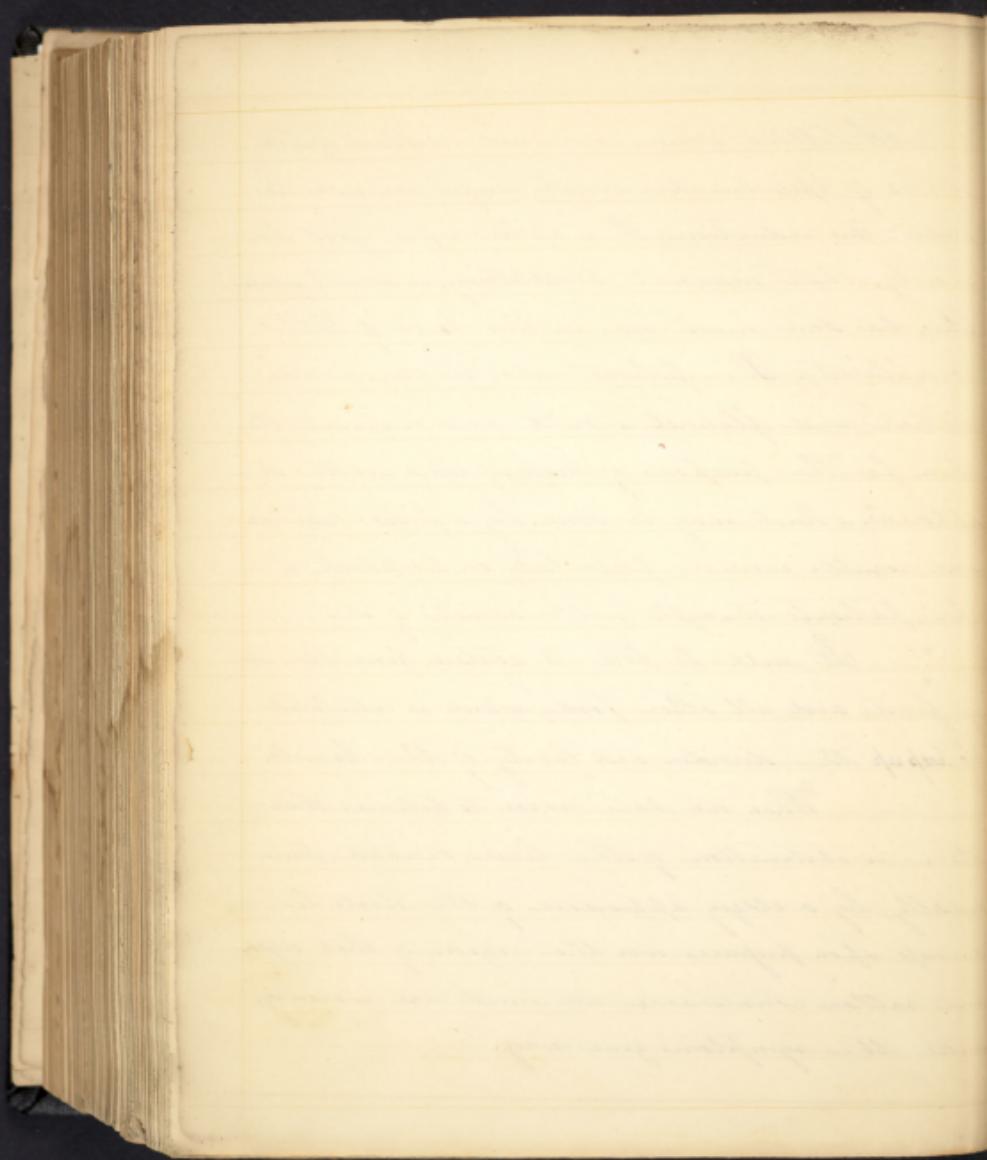


terly cautious with respect to their mode of living;

I will now devote a few remarks to the treatment of this disease in its chronic form. Although the acute symptoms have subsided, the intestines are frequently left in a weakened and debilitated state. The evacuations are still frequent, and often attended with pain; and the skin parched and dry, with considerable emaciation and debility.

The want of healthy action on the surface of the body, is owing to confinement of the blood to the great vessels internally. Under these circumstances, it will not answer to carry depleting measures to any extent; since the patient is already worn out and exhausted, by the continual irritation, under which he has so long suffered.

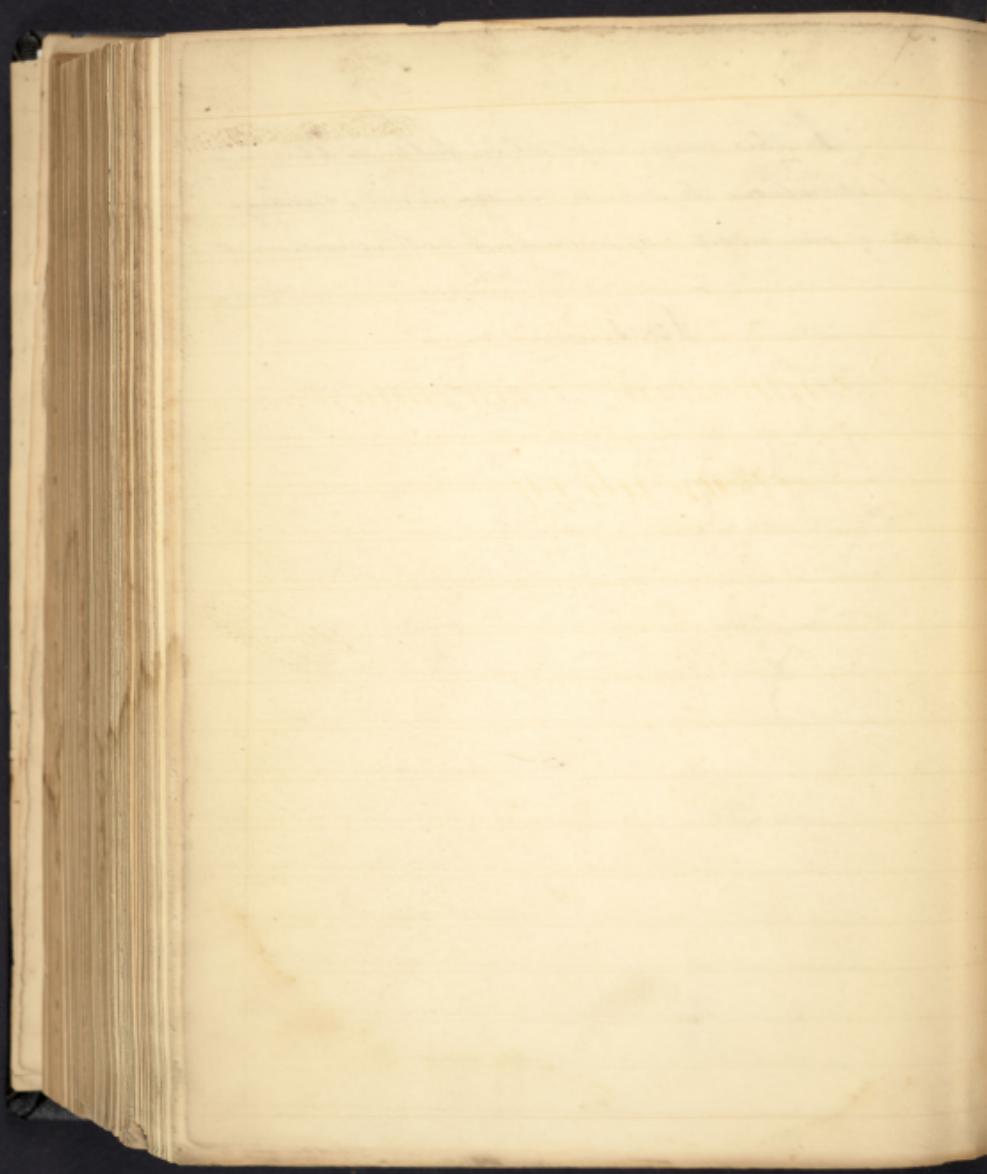
Here we must adopt such measures as are calculated to allay irritation, and determine to the surface of the body.



or little opium, combined with a grain or two of ipecacuanha, is very useful, in order to assist this induction. It is stated upon good authority, that occasional bloodletting, in small quantities, has done much good in this form of the complaint. The patient should be warmly clothed, and flannel should be worn next the skin, for the purpose of keeping up a gentle perspiration. Much may be done by a proper regimen, and regular exercise, particularly on horseback, if the patient's strength will admit of it.

It will be best to abstain from the use of fruits, and all other foods, which is calculated to keep up the disorder and laxity of the bowels.

When we have reason to believe that there is obstruction of the liver, denoted, principally, by a clayey appearance of the stool, tenderness upon pressure over the region of that organ, and sallow countenance, we must use mercury, until the symptoms give way.



In this case, the blue pill is the best preparation to which we can resort, according to some of our most experienced practitioners.

Finis.

